

COUNTY BOROUGH OF WALLASEY



# ANNUAL REPORT

of the

**Medical Officer of Health**

and

**Principal**

**School Medical Officer**

FOR THE YEAR

**1961**

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HOWARD W. HALL, M.B., Ch.B., D.P.H.

*Medical Officer of Health, Administrative Tuberculosis Officer,  
Principal School Medical Officer, etc.*

Including the Report of the  
CHIEF PUBLIC HEALTH INSPECTOR  
(A RIDGWAY, M.A.P.H.I.).

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\* Denotes — Incorporates information specifically required by Ministry of Health.



Public Health Department,

Town Hall,

Wallasey.

To: The Mayor, Aldermen and Councillors of the County Borough of Wallasey.

I have pleasure in presenting to you the Annual Report on the Health, Welfare and School Health Services of the Borough for the year 1961.

#### **VITAL STATISTICS.**

The birth rate for the borough was 18.00 per 1,000 population as compared with 17.88 in 1960. There was an increase in the number of illegitimate live births, 119 (6.41 per cent. of the total live births) compared with 77 (4.16 per cent.) for the previous year, recorded by the Registrar-General as belonging to the borough. This is a regrettable trend, particularly so when the ages of some of the unmarried mothers fall well into the teenage group 14—17 years.

On a happier note, I am pleased to report that there were only 36 deaths of infants under the age of one year giving an infant mortality rate of 19.38 as compared with 45 deaths and a rate of 24.32 in 1960. This is the lowest infant mortality rate ever recorded in Wallasey and is mainly due to the reduced numbers of very small premature infants born in the borough during the year. These figures, however, tend to fluctuate in a borough the size of Wallasey and might not necessarily be repeated in 1962.

The perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths) was 31.63 as compared with a rate of 31.78 the previous year. Causes of the stillbirths, early neo-natal deaths, neo-natal deaths and other infant deaths can be found on pages 26—28 of the report.

Deaths in the borough from all causes numbered 1,425 as compared with 1,302 in 1960 giving a death rate of 13.80 per 1,000 population compared with 12.59 in 1960. Cancer of the lung and bronchus accounted for 60 deaths (51 males and 9 females). The steady increase in deaths from this disease over the last decade can be seen by studying the graph on page 13. Obviously greater efforts will have to be made to draw the public's attention to the dangers of cigarette smoking. Deaths from coronary artery disease numbered 292 as compared with 275 in 1960. Influenza accounted for 20 deaths mostly in the elderly as against none in 1960. Deaths from pneumonia were up by 22 to 88. There were 11 deaths from pulmonary tuberculosis giving a phthisis death rate per 1,000 population of 0.107 compared with a rate of 0.097 the previous year.

#### **INFECTIOUS DISEASES.**

Influenza was prevalent during the first two months of the year affecting the elderly in the main. There were five cases of acute poliomyelitis, details of which can be found in Part II of the report.

#### **DOMICILIARY MIDWIFERY SERVICE.**

There were 427 home confinements, 20 fewer than in the previous year. To offset this the midwives attended an additional 22 mothers who were confined in hospital, but discharged before the tenth day. These cases totalled 76 compared with 54 in 1960.

#### **HEALTH VISITING.**

A small start was made towards the health visitors working in closer collaboration with the general practitioners along the lines indicated in the report of the Joint Working Party of the Royal College of Nursing and the College of General Practitioners entitled "The Health Visitor and the Family Doctor." The health visitors are to be complemented on organising and running a Mothers' Club at Moreton Clinic during their leisure hours.

#### **DISTRICT NURSING SERVICE.**

This service continued to function smoothly throughout the year. The appointment of a bath attendant in October filled a great need.



## **VACCINATION AND IMMUNISATION.**

The year was a very busy one. A campaign for immunisation against poliomyelitis was launched in the spring, which gathered impetus when several cases of acute poliomyelitis were notified on Merseyside.

I should like to take this opportunity of thanking all general practitioners in the borough for their invaluable help in the campaign.

## **AMBULANCE SERVICE.**

Heavy demands on the service at times exceeded its carrying capacity and the service was stretched to the limit at peak periods. As a result of a report on this service setting out the difficulties being encountered in its operation, the establishment was increased by three driver/attendants as from December, 1961.

It will be seen from the tables that although the number of cases conveyed during the year rose to 35,660 from 34,896 in 1960, the total mileage covered was reduced from 158,279 to 152,850, which reflects credit to the Chief Fire and Ambulance Officer in the economical deployment of vehicles.

## **CHIROPODY SERVICE.**

This new service continued to expand and was much appreciated by many old people in the borough.

## **MENTAL HEALTH SERVICE.**

In July one of the mental welfare officers was regraded Senior Mental Welfare Officer to be responsible for the day-to-day running of this increasingly important section of the department. An account of the work of the section during the first full year's operation of the 1959 Mental Health Act can be found on pages 55—61. It is interesting to note that the use of compulsory powers in Sections 29, 25 and 26 of the new Act were necessary in quite a large proportion of cases admitted to psychiatric hospitals. Preliminary work on plans for a mental health hostel and an adult training centre continued throughout the year.

## **ENVIRONMENTAL HEALTH.**

It is with deepest regret that I have to report the death in November of Mr. Bascombe, public health inspector. He served the Corporation faithfully over many years, joining the department as a pupil inspector in 1924.

Mr. Gilpin, Chief Public Health Inspector, resigned his appointment in July to take up a post with the Central Electricity Generating Board. Although he was in Wallasey for only three and a half years Mr. Gilpin has left his mark on the department by giving the borough an excellent start in its quest for clean air. We wish him well in his new post. The promotion of Mr. Ridgway pleased everyone in the department.

An account of the work of the section is given in Section V of the report. In addition to the progress of the campaign for clean air, a start was made in the second five years' slum clearance programme. At the September meeting of the General Health Committee three clearance areas were represented comprising 126 unfit dwelling houses in the Beaconsfield Road, Demesne Street, Brighton Street area.

## **SERVICES FOR OLD PEOPLE.**

Joint Circular Ministry of Housing and Local Government No. 10/61 and Ministry of Health 12/61 was discussed by representatives of the Health, Welfare and Housing Committees and it was resolved that (a) it be a reference to the Housing Committee that phase three of the Mersey Street Area Development Scheme be amended to provide approximately 25% of dwelling accommodation in suitable units for old people; (b) it be a reference to the Health Committee that the Home Help Service be expanded to provide a continuing service for elderly disabled persons where necessary.

Both parent committees accepted these recommendations and at the time of writing his foreword to the 1961 Annual Report, consideration is being given to further expansion of the services for old people in the community as part of the ten-year development plans of the Health and Welfare Committees.

## **WELFARE SERVICES.**

I should like to record my appreciation for the long and faithful service of Mr. R. C. Ollive, who retired at the end of April after thirty-one years' service with the Council in the first instance as Public Assistance Officer and latterly as Senior Welfare Officer.

Mr. D. G. Wharton took up his appointment as Senior Welfare Officer on 1st May and quickly came to grips with the many problems in equipping the new hostels.

A full account of the services is given in Part VI of the report. The main events were the opening of the two new hostels — "Fernleigh" 50 places for the more infirm in October, and "Manor Grange" 18 places received its first residents during the latter part of December. The 68 new places were very much needed but the new total of 149 does not yet meet fully the needs of those elderly people in the borough requiring care and attention and the Welfare Committee are considering plans for further hostel accommodation.

I should again like to take this opportunity of thanking all voluntary organisations in the Borough for their very valuable contribution towards the Welfare Services, in particular, the Wallasey Voluntary Welfare Committee for their regular visits to the elderly and lonely in the Borough, and for their work at Hinton House, also the Women's Voluntary Services for their fine work in operating such an efficient Meals-on-Wheels Service which ranks as one of the best in the whole country. The Women's Voluntary Services also run two "bed-sitter" schemes at the Mary Elkin Home and at 10 St. James Road, the elderly residents being selected jointly with members of the Housing Committee.

In conclusion, I should like to thank the Chairman and members of the Health, General Health and Welfare Committees for their support and encouragement given to me throughout the year. I should also like to thank the Town Clerk and other Chief Officials for their co-operation and helpful advice and also all the members of my staff for their loyal support and hard work.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

**HOWARD W. HALL,**

**Medical Officer of Health.**



# PUBLIC HEALTH OFFICERS of the AUTHORITY

As at 31st December, 1961.

*Medical Officer of Health and Principal School Medical Officer:*

HOWARD W. HALL, M.B., Ch.B., D.P.H.

Town Hall, Wallasey. Telephone No. Wallasey 1600—Ext. 120.

*Deputy Medical Officer of Health and Deputy Principal School Medical Officer:*

WILLIAM F. CHRISTIAN, M.B., Ch.B., D.P.H.

*Assistant Medical Officer of Health and School Medical Officer:*

EDWARD J. A. O'REILLY, M.B., Ch.B., B.A.O. (Obstetrics)

*Assistant Medical Officer of Health, School Medical Officer and Medical Supervisor of Midwives:*

ESME I. GRANT, M.R.C.S., L.R.C.P.

*Tuberculosis Officer (Part-Time):*

JAMES BAXTER, M.B., Ch.B., D.P.H.

*Principal Dental Officer:*

C. J. LUYA, L.D.S

*Dental Officers:*

W. A. HENDERSON, L.D.S.

E. G. MASON, L.D.S.

T. H. M. MOULDS, L.D.S.

*Chief Public Health Inspector:*

A. RIDGWAY, M.A.P.H.I.

*Deputy Chief Public Health Inspector:*

T. BARLEY.

*District Public Health Inspectors:*

W. H. FARR

R. HUGHES

R. JONES

J. Q. CALLISTER

G. CARR

W. GLADDEN

L. G. RINGROW

K. J. WARBRICK

*Milk, Dairies and Meat Inspector and Inspector under Diseases of Animals Acts and Orders:*

G. A. OWEN

*Superintendent Health Visitor/School Nurse:*

Mrs. K. SCHOFIELD

*Health Visitors/School Nurses (Whole-Time):*

Miss A. J. EDGE

Miss C. E. MURRELL

Mrs. E. P. NOLAN

Mrs. A. J. SMITH

Mrs. W. DOVEY

Miss M. E. ASPINALL

Miss K. E. HIGGINS

Miss E. M. MORGAN

Miss E. WHITBURN

Miss M. B. JONES

Mrs. L. M. JONES

Mrs. M. KEANE

Mrs. E. SIMPSON

Miss A. DOYLE



*Health Visitor/School Nurses (Part-Time):*

Mrs. I. D. WINTERBURN  
Mrs. M. J. GRIFFITHS  
Mrs. M. E. GALLIMORE

*Municipal Midwives:*

Mrs. E. E. HINTON	Mrs. P. SHACKLADY
Mrs. F. E. BOYD	Mrs. A. B. TIMEWELL
Miss E. HOMER	Miss I. K. PAISLEY
Miss E. WOODS	

*Chief Weights and Measures and Food and Drugs Inspector:*

J. A. W. PRICE, Cert. Board of Trade

*Weights and Measures and Food and Drugs Inspector:*

J. A. ISHERWOOD, Cert. Board of Trade

*Public Analyst (Part-Time):*

TENNYSON HARRIS

*Chief Administrative Assistant:*

G. A. LOXHAM, D.P.A.

*Clerical Staff:*

R. G. BARRY (Senior Clerk)	Mrs. G. DODD
J. M. GIBSON	Mrs. J. NICHOLSON
Miss G. BOOTH	Mrs. A. E. JONES
Miss M. BLENCOWE	Miss A. ELCOCK
Miss B. M. HERRIOT	Miss S. C. PEALING
Miss H. J. HARRIS	Mrs. M. E. ROBERTS
Miss E. MASTERS	Mrs. N. FISHER
Miss B. FISHWICK	Miss S. FOX
Miss J. FIELDING	

*Part-Time Specialists discharging duties in connection with Special Clinics:*

Mr. J. D. ELLIOTT EDWARDS, M.B., Ch.B., D.O.M.S. (Ophthalmic)  
Mr. H. DAVIES, M.B., F.R.C.S.(Eng.), Ch.B., Ch.M. (Orthopaedic):

*Matrons of Day Nurseries:*

Miss E. GREENLY, Central Park Day Nursery  
Miss G. E. MORGAN, Oakdale Day Nursery  
Miss P. WARNER, Eastway Day Nursery

*Superintendent District Nursing Service:*

Miss E. FAIRLESS, S.R.N., S.C.M., Q.N.S., H.V.Cert.

*District Nurses (Whole-Time):*

Mrs. M. PRENDERGAST	Miss S. M. DAVIES
Mrs. S. DUDLEY	Mrs. I. A. MATTHEWS
Miss B. JOY	Miss B. E. JONES
Mrs. K. ELSON	Mrs. K. DUNNE
Miss M. GOVIER	Miss B. M. FORSTER
Mrs. D. EVANS	Miss M. E. GOODWIN
Mrs. E. M. BLEASE	Miss B. HUNTINGTON
Mrs. J. A. MOON	Miss E. E. O'DONNELL

*District Nurses (Part-Time):*

Mrs. M. M. KING                      Mrs. G. WALL

*Domestic Help Organiser:*

Mrs. G. M. FALLA

*Supervisor Junior Training Centre:*

Miss I. P. D. MACDONALD

*Senior Mental Welfare Officer:*

F. WALL

*Mental Welfare Officers:*

K. MERCER

Mrs. E. A. BRERETON

J. HOUGHTON

*Mental Health Worker:*

Miss M. V. PHILLIPS

**WELFARE SERVICES**

*Senior Welfare Officer:*

D. G. WHARTON

*Welfare Officers:*

F. WALL

K. MERCER

Mrs. E. A. BRERETON

J. HOUGHTON

*Welfare Officer (Rehabilitation):*

Miss N. G. TALBOT

*Welfare Officer (Handicapped Persons):*

Mrs. W. DAVIES

*Handicrafts Teacher (Handicapped Persons):*

Mrs. C. W. GRIFFITH

*Home Teachers of the Blind:*

Miss A. RODGERS

Mrs. M. M. KENNY

*Clerical Staff:*

A. C. HINTON

D. FARQUHAR

Miss D. M. PERKINS

Miss E. C. BIRCHALL

*Matrons of Hostels for the Aged:*

Miss M. ROBERTS, "Fernleigh"

Miss E. PARSONS, "Lamorna"

Mrs. A. P. JACKSON, "Redcliffe"

Miss L. WEIGHTMAN, "Newholme"

Miss W. M. FITZGERALD, "Manor Grange"

*Warden—Reception Centre:*

Mrs. G. M. TEAGUE

# PART I.

---

## *Vital Statistics, Etc.*

**VITAL STATISTICS, Etc.**

(a) As requested, by the Ministry of Health, in accordance with Circular 1/62:—

	1960	1961
Live Births—Males ... ..	950	1,009
Females ... ..	900	849
	<hr/> 1,850	<hr/> 1,858
Live birth rate per 1,000 population ... ..	17.88	18.00
Illegitimate live births per cent of total live births	4.16	6.41
Still Births—Males ... ..	20	24
Females ... ..	18	... 15
	<hr/> 38	<hr/> 39
Rate per 1,000 total live and still births ...	20.13	20.56
Total live and still births ... ..	1,888	1,897
Infant deaths (deaths under one year)		
Males ... ..	28	23
Females ... ..	17	13
	<hr/> 45	<hr/> 36
Infant Mortality Rates—		
Total infant deaths per 1,000 total live births	24.32	19.38
Legitimate infant deaths per 1,000 legitimate live births	24.82	20.70
Illegitimate infant deaths per 1,000 illegitimate live births	12.99	0.00
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	15.68	12.92
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	11.89	11.30
Perinatal Mortality Rate (Still births and deaths under one week combined per 1,000 total live and still births) ... ..	31.78	31.63
Maternal Mortality (including abortion)—		
Number of deaths ... ..	1	1
Rate per 1,000 total live and still births	0.53	0.53
	1960	1961

(b) Other details:—

Census population (April, 1951) ...	101,369	101,369
Registrar General's estimated population at mid-year	103,450	103,240



	1960	1961
Deaths to 31st December		
Males ... ..	653	694
Females ... ..	649	731
	<hr/> 1,302	<hr/> 1,425
Death rate (unadjusted) per 1,000 of estimated population	12.59	13.80
Death rate per 1,000 of estimated population adjusted by area comparability factor of 1.02	12.84	14.08
Death rate per 1,000 of estimated population—England and Wales	11.5	11.9
Birth rate per 1,000 of estimated population—England and Wales	17.1	17.4*
* Provisional.		
Phthisis death rate per 1,000 of population	0.097	0.107
Area in acres as ascertained by Ordnance Survey, January, 1935	5,961	5,961
River and sea frontage ... ..	Slightly less than 8 miles	
Inhabited houses at 31st December ... ..	31,170	31,285
Uninhabited houses at 31st December ... ..	505	518
Rateable value of the borough as at 31st December	£1,402,161	£1,405,131
	1960/61	1961/62
Yield of 1d. rate ... ..	£5,685	£5,638

#### PRINCIPAL CAUSES OF DEATH

	1960	1961
Heart Disease ... ..	466	477
Cancer ... ..	214	249
Respiratory Diseases—		
Pneumonia ... .. 66 )		88 )
Bronchitis ... .. 76 )	150	70 ) 163
Other ... .. 8 )		5 )
Vascular lesions of nervous system ...	188	216
Violent Deaths (including suicides) ...	53	35

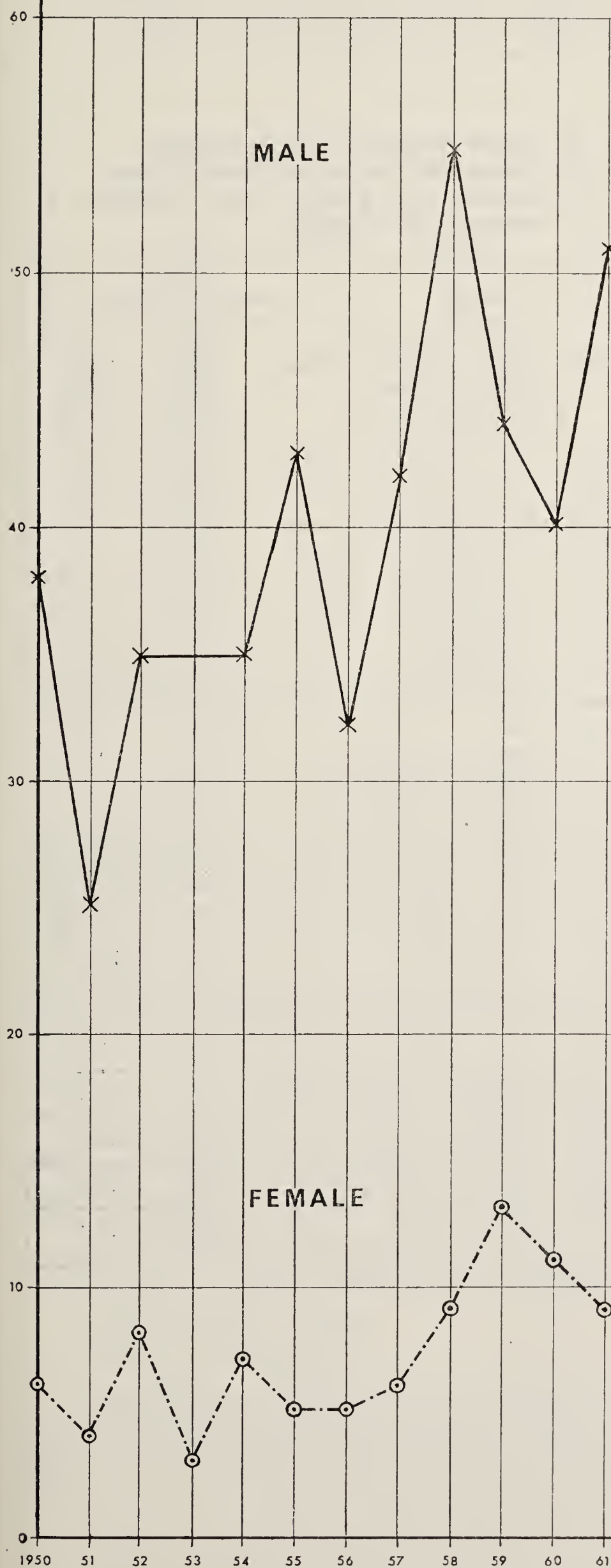
#### MATERNAL MORTALITY

There was one maternal death of a Wallasey resident during 1961.

## SUMMARY OF DEATHS DURING THE YEAR 1961

CAUSES OF DEATH	SEXES		All Ages	DEATHS IN WHOLE DISTRICT							
	M.	F.		0-	1-	5-	15-	25-	45-	65-	75-
Tuberculosis—											
respiratory ...	8	3	11	—	—	—	—	1	5	3	2
Tuberculosis—other ...	—	—	—	—	—	—	—	—	—	—	—
Syphilitic disease ...	2	—	2	—	—	—	—	—	1	—	1
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
Whooping cough ...	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection ...	—	—	—	—	—	—	—	—	—	—	—
Acute polio-myelitis ...	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ...	1	—	1	—	—	—	—	—	—	—	1
Malignant neoplasm—stomach ...	14	18	32	—	—	—	—	—	12	8	12
Malignant neoplasm—lung, bronchus ...	51	9	60	—	—	—	—	4	24	27	5
Malignant neoplasm—breast ...	—	25	25	—	—	—	—	2	11	6	6
Malignant neoplasm—uterus ...	—	12	12	—	—	—	—	2	5	2	3
Other malignant and lymphatic neoplasms ...	55	65	120	—	—	2	—	6	34	32	46
Leukaemia, Aleukaemia ...	5	8	13	—	1	—	1	2	4	1	4
Diabetes ...	5	7	12	—	—	—	—	2	5	1	4
Vascular lesions of nervous system ...	65	151	216	—	—	—	—	—	26	58	132
Coronary disease angina ...	183	109	292	—	—	—	—	3	81	110	98
Hypertension with heart disease ...	7	11	18	—	—	—	—	—	6	3	9
Other heart disease ...	73	94	167	—	—	—	—	3	23	30	111
Other circulatory disease ...	19	30	49	—	—	—	—	3	4	14	28
Influenza ...	11	9	20	—	—	1	—	2	3	5	9
Pneumonia ...	42	46	88	7	3	—	—	2	9	22	45
Bronchitis ...	43	27	70	—	—	—	—	—	18	27	25
Other diseases of respiratory system ...	4	1	5	—	—	—	—	—	2	—	3
Ulcer of stomach and duodenum ...	10	5	15	—	—	—	—	1	5	4	5
Gastritis, Enteritis and diarrhoea ...	2	1	3	—	—	—	—	—	—	3	—
Nephritis and Nephrosis ...	6	7	13	1	—	—	—	2	2	3	5
Hyperplasia of prostate ...	4	—	4	—	—	—	—	—	—	1	3
Pregnancy, childbirth abortion ...	—	1	1	—	—	—	1	—	—	—	—
Congenital malformations ...	7	7	14	10	2	1	—	—	—	1	—
Other defined and ill-defined diseases ...	59	68	127	18	—	3	—	2	21	12	71
Motor vehicle accidents ...	5	4	9	—	—	—	2	1	2	1	3
All other accidents ...	5	4	9	—	1	1	—	1	3	2	1
Suicide ...	8	9	17	—	—	—	1	5	9	1	1
Homicide and operations of war ...	—	—	—	—	—	—	—	—	—	—	—
ALL CAUSES ...	694	731	1425	36	7	8	5	44	315	377	633

# DEATHS IN WALLASEY DUE TO MALIGNANT NEO-PLASM, LUNG & BRONCHUS.





**TABLE SHOWING** (a) **Infant Deaths and Death Rates.**  
 (b) **Neo-natal deaths and Death Rates.**  
 (c) **Deaths and Death Rates (infants 4 weeks to 12 months).**

Year	Infants		Neo-natal			4 weeks—12 months		
	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	% of Total Infant Deaths	Deaths	Rate per 1,000 Births	% of Total Infant Deaths
1944	77	43.0	34	19.0	44.16	43	24.0	55.84
1945	97	56.8	38	22.3	39.18	59	34.57	60.82
1946	87	42.2	51	24.7	58.62	36	17.48	41.38
1947	111	51.1	57	26.9	51.35	54	25.09	48.65
1948	78	43.5	38	20.67	48.72	40	22.35	51.28
1949	64	35.8	34	19.0	53.13	30	16.82	46.87
1950	49	28.7	28	16.41	57.14	21	12.31	42.86
1951	55	32.4	35	20.62	63.63	20	11.19	36.37
1952	56	33.3	43	25.62	76.78	13	7.75	23.22
1953	41	24.7	29	17.51	70.74	12	7.25	29.26
1954	43	25.1	29	16.94	67.44	14	8.12	32.56
1955	41	25.4	29	17.96	70.74	12	7.44	29.26
1956	42	24.07	31	17.77	73.81	11	6.30	26.19
1957	48	26.10	33	17.94	68.75	15	8.16	31.25
1958	44	24.69	32	17.96	72.73	12	6.73	27.27
1959	48	26.06	37	20.09	77.08	11	5.97	22.92
1960	45	24.32	29	15.68	64.44	16	8.64	35.56
1961	36	19.38	24	12.92	66.66	12	6.46	33.33



**TABLE SHOWING the Infantile Mortality rates of the Borough as compared with the figures for the whole of England and Wales for the census years from 1901 to 1951 and consecutive years to 1961.**

<i>Year</i>	<i>Wallasey</i>	<i>England and Wales</i>
1901	142.0	151
1911	109.0	130
1921	59.0	83
1931	44.8	66
1941	78.9	60
1951	32.4	29
1952	33.3	27
1953	24.7	27
1954	25.1	25
1955	25.4	25
1956	24.07	24
1957	26.10	23
1958	24.69	23
1959	26.06	22
1960	24.32	22
1961	19.38	22

### ILLEGITIMACY

During the year there were 119 illegitimate live births (57 Male : 62 Female) recorded by the Registrar-General as belonging to the borough, compared with 77 in 1960. This gives an illegitimate birth-rate of 64.1 per thousand total live births, as compared with 41.62 in 1960.

There were no deaths of illegitimate infants during the year 1961. There were four illegitimate still births (3 Male : 1 Female).

### ECONOMIC CONDITIONS

The number of unemployed persons in the borough in January, 1961, was 1,467 and in December, 1,195, as compared with 1,677 and 1,325 respectively in January and December, 1960.

The following amounts were expended on Unemployment, etc., Benefit by the Wallasey Employment Exchange:—

Unemployment Benefit	... ..	£111,740
Assistance Allowances	... ..	£76,460

The number of persons on the Unemployment Register normally starts to diminish in February each year, until July, when it is at its lowest. The figures for July, 1960, were 1,116 and for July, 1961, 887.



## PART II.

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### *Occurrence and Control of Infectious Diseases*

# **CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES NOTIFIED IN WALLASEY DURING 1961**

NOTIFIABLE DISEASES	Totals	Cases notified at ages										
		under 1	1	2	3	4	5-9	10-14	15-24	25-44	45-64	65 & over
Small-pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Malaria ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning ... ..	7	—	—	—	—	1	2	2	1	—	1	—
Dysentery ... ..	34	1	1	4	2	7	8	2	—	4	3	2
Diphtheria (including Membranous Croup)	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	5	—	—	—	—	—	—	—	—	1	2	2
Scarlet Fever ... ..	31	—	1	3	4	4	13	3	3	—	—	—
Paratyphoid ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ... ..	20	—	—	—	—	—	—	—	11	9	—	—
Meningococcal Infection	1	—	1	—	—	—	—	—	—	—	—	—
Poliomyelitis (Paralytic)	4	—	2	—	1	—	1	—	—	—	—	—
Poliomyelitis (Non-Paralytic) ... ..	1	—	1	—	—	—	—	—	—	—	—	—
Pneumonia ... ..	51	—	2	—	—	1	2	—	—	4	24	18
Ophthalmia Neonatorum	1	1	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	45	—	—	—	—	—	1	2	7	9	13	13
Other forms of Tuber- culosis ... ..	5	—	—	—	—	—	—	—	—	2	3	—
Measles ... ..	982	40	108	150	141	129	399	13	2	—	—	—
Whooping Cough ... ..	147	13	15	15	18	48	36	1	—	1	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—
Post Infectious Encephalitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Acute Infective Encephalitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Polio-Encephalitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—
<b>TOTALS ... ..</b>	<b>1334</b>	<b>55</b>	<b>131</b>	<b>172</b>	<b>166</b>	<b>190</b>	<b>462</b>	<b>23</b>	<b>24</b>	<b>30</b>	<b>46</b>	<b>35</b>



## INFECTIOUS DISEASES—INVESTIGATIONS AND VISITS OF SURVEILLANCE.

During the year a total of 1356 visits were made by the health visitors and public health inspectors to infectious cases and contacts as follows:—

	Enquiry visits	Visits of Surveillance	Total Visits
Health Visitors ... ..	864	348	1,212
Public Health Inspectors ...	69	75	144
	<hr/> 933 <hr/>	<hr/> 423 <hr/>	<hr/> 1,356 <hr/>

A total of 638 specimens were submitted to the Public Health Laboratory in connection with the occurrence of cases of food poisoning and dysentery.

### Diphtheria.

No cases of diphtheria were notified. Immunisation against diphtheria was first introduced in 1935. It is significant to note that in the six years 1934/9 inclusive there were 1336 confirmed cases of the disease in the borough and during this period 91 persons died of the disease. The immunisation of children has continued steadily since the inception of the scheme and it is gratifying to note that not one case of the disease has occurred in Wallasey in the last six years, i.e. 1956—1961. Nevertheless, from time to time there have been isolated cases in various parts of the country and the importance of parents having their children immunised against diphtheria cannot be over-emphasised.

### Scarlet Fever.

31 cases of scarlet fever were notified during 1961 compared with 55 cases in 1960 and 84 in 1959. There were no deaths.

This infectious disease is of a very mild type compared with that of twenty or thirty years ago, so much so that many doctors in the borough do not notify cases. Notification is, however, important when a food handler is concerned.

### Puerperal Pyrexia.

There were 20 notifications of puerperal pyrexia during the year, none of which proved fatal.

### Ophthalmia Neonatorum.

There was one case of ophthalmia neonatorum notified during the year. This was a staphylococcal infection which responded well to treatment.

### Whooping Cough.

147 cases were notified during the year. Of these five children had received a full course of immunisation against whooping cough; three children had received two injections only and 47 had received one injection only. No case was fatal. During 1961 a total of 1651 children were immunised.

### Measles.

There were 982 cases of measles notified during 1961 compared with 587 in 1960. There were no deaths.

Health visitors do not visit homes where it is known that the standard of care is satisfactory.

### Poliomyelitis.

There were five cases of acute anterior poliomyelitis during the year. Details are as follows:—

(a) Girl, aged six years. Mild case with paralysis of muscles in left arm. She made a good recovery. The left arm was only slightly thinner than the right arm when follow-up visit was made eleven months after the onset of the illness. This girl was only partially immunised against the disease, receiving her first injection of anti-poliomyelitis vaccine a fortnight before the onset of the disease.

Polio Virus Type I was isolated from the faeces on the tenth day of the disease.

The family contacts were kept under surveillance for twenty-one days, and although two younger brothers were found to be faecal carriers of Polio Virus Type I, no other member of the family developed the disease.

(b) Boy aged  $3\frac{1}{2}$  years. Right facial paralysis. Polio Virus Type I isolated from stools. The child was not immunised. Good recovery. No facial paralysis noticed on follow-up visit ten months after onset.

(c) Boy aged 16 months with bulbar paralysis treated in Fazakerley Hospital from 14-7-61 until 4-10-61. Made a good recovery. Health visitor reports in excellent health six months after discharge. Child was not immunised.

(d) Boy aged  $1\frac{1}{2}$  years. Paresis muscles right leg. Child had had second injection of anti-poliomyelitis vaccine five months prior to onset of the disease. Good recovery made. No residual paralysis or muscle wasting observed at follow-up visit six months after onset.

(e) Boy aged  $1\frac{1}{2}$  years. Some paralysis left leg. Had second injection of anti-poliomyelitis vaccine six months before the onset of the disease. Polio Virus Type I isolated from stools. Follow-up visit paid six months after onset of the disease. Still under treatment by the Orthopaedic Surgeon. Still some weakness of the left leg — 'Walks with a limp'.

### **Meningitis.**

One case of meningococcal meningitis occurred in a child aged one year and eight months. Child made a good recovery without any obvious sequelae but name was added to "At Risk" group for hearing tests.

### **Smallpox.**

No case of smallpox occurred during the year.

### **Paratyphoid Fever.**

There were no cases of paratyphoid fever notified during 1961.

### **Food Poisoning.**

Seven cases of food poisoning were confirmed during the year, compared with five cases in 1960. Six cases occurred in an organised party of children who were on a day's outing to Leasowe Common from Liverpool. All the food consumed by this party was brought with them. Staph: Pyogenes was isolated from the remains of the foodstuffs and this was traced to one of the organisers who had prepared the food.

In the other case, Staph: Pyogenes was isolated and one other member of the household was found to be a symptomless carrier of Salmonella typhi murium.

### **Dysentery**

There were 34 confirmed cases of sonne dysentery during the year. 160 enquiries and 288 visits of surveillance were made by health visitors and public health inspectors. 499 specimens were submitted to the Public Health Laboratory for bacteriological examination. All cases were kept under surveillance until three consecutive specimens were found to be free from pathogenic organisms.





## PART III.

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### *Services provided under part III of The National Health Service Act, 1946.*

Section 21—Health Centres.

- „ 22—Care of Mothers and Young Children.
- „ 23—Midwifery Services.
- „ 24—Health Visiting.
- „ 25—Home Nursing.
- „ 26—Vaccination and Immunisation.
- „ 27—Ambulance Service.
- „ 28—Prevention of Illness—Care and After-Care.
- „ 29—Domestic Help Service.
- „ 28 and 51—Mental Health Services.

# *Services provided under Part III of The National Health Service Act, 1946.*

## **SECTION 21 — HEALTH CENTRES.**

No Health Centres have been constructed or are in course of construction in Wallasey.

## **SECTION 22 — CARE OF MOTHERS AND YOUNG CHILDREN**

**Ante-Natal Clinics-** These clinics are held as follows:—

**(a) The Midwives' Clinics:**

Monday evenings at Merton Road Clinic 6 p.m. to 7 p.m.

Tuesday evenings Water Street Clinic 6 p.m. to 7 p.m.

Thursday evenings Moreton Clinic 6 p.m. to 7 p.m.

The following are details of attendances during 1961—

	<i>Sessions held</i>	<i>Expectant Mothers attending</i>	<i>No. of attendances</i>
Water Street ... ..	51	137	803
Merton Road ... ..	48	171	668
Oakenholt Rd., Moreton	52	164	648
	<hr/> 151	<hr/> 472	<hr/> 2,119

**(b) The Assistant Medical Officer of Health's Clinics:**

Water Street Clinic 1st and 3rd Monday of each month at 2.0 p.m.

Merton Road Clinic 2nd and 4th Monday of each month at 2.0 p.m.

Moreton Clinic 3rd Friday in the month at 2.0 p.m.

The following are details of attendances during 1961:—

Expectant mothers on books at January 1st ... ..	13
New cases during the year ... ..	47
Names on books at December 31st ... ..	10
Attendances of Expectant Mothers ... ..	93

**Dr. E. I. Grant, Assistant Medical Officer of Health, reports as follows:—**

These clinics, as such, have virtually almost disappeared, and have been superseded by the Midwives clinics. There are still a few expectant mothers who are anxious to attend the Assistant M.O.H.'s clinics but I do not anticipate that this number will increase. Under the National Health Service the patient can book her own doctor and midwife and attend their clinics or surgeries and thus the two become well acquainted with the patient before the actual confinement takes place. This should be the perfect arrangement, but in actual fact, it still seems to leave something to be desired. The general practitioner



is often too busy to chat to the young expectant mother and put her mind at rest about some of her problems, and so is the midwife, because she, too, sees a large number of cases at each clinic. Thus there are quite a few of these ante-natal patients who are still not fully catered for, and who are worried and ignorant about themselves and their coming confinement. To remedy this, arrangements are being made for health visitors to attend our midwives evening clinics to give intimate talks to the mothers, explaining in simple language, the mechanism of the actual delivery of the child, teaching them the art of child care and allowing them the opportunity of asking questions and discussing many points about mothercraft, parentcraft, infant welfare and child-birth. We are endeavouring to reach all primipara with these talks, but as many of them are booked for delivery at Highfield and attend only their doctor's clinic it is not always possible for the Local Health Authority to get this health education over to them.

The importance of this aspect of ante-natal care is now fully recognised by the World Health Organisation and we must all strive to ensure that every mother-to-be realises the value of good health, the importance of any symptoms of ill-health, and how best to attain the highest possible standards of cleanliness, hygiene and parentcraft in order that she may have an uncomplicated confinement and produce a healthy child.

### **Post-Natal Clinics**

Eight mothers attended for post-natal examination during the year, making nine attendances. In addition the health visitors and midwives encourage and stress the importance of mothers attending for post-natal examination by their own doctors.

### **Care of Premature Babies**

The Midwives, Health Visitors and Maternity Hospitals work in close liaison with each other to ensure that premature infants receive the correct care and attention in the home.

Whenever it is considered desirable, however, premature babies are admitted by ambulance to the well-equipped Premature Baby Unit at St. Catherine's Hospital, Birkenhead. On subsequent discharge, the case is kept under regular supervision by the health visitor.

In those cases where the infant is cared for at home, special equipment is available from the Health Department.

The Maternity Hospitals notify the Department of premature births by telephone so that the delay between the date of discharge and the date of the health visitor's first call is as little as possible.

Home Helps are provided when necessary in cases where premature infants are born at home.

The following table gives details of premature live births during the year:—

Weight at birth	Premature Live Births															Still-Births Premature		
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
3 lb. 4 oz. or less (1,500 gms. or less)	10	2	6	—	—	—	2	—	1	—	—	—	—	—	—	4	3	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	13	1	11	—	—	—	4	—	4	—	—	—	—	—	—	10	1	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	17	—	17	2	—	2	1	—	1	—	—	—	—	—	—	3	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	56	3	53	14	—	14	2	—	2	—	—	—	—	—	—	4	—	—
Totals ...	96	6	87	16	—	16	9	—	6	—	—	—	—	—	—	21	4	—

The Public Health Department has scales which can be had on loan for weighing premature babies in the homes. No charge is made. Forty-three parents took advantage of this service during the year.

The Health Visitors attended 44 Saturday morning sessions at Dr. Farquhar's premature baby clinics at Highfield during the year.

### **Stillbirths and Neo-Natal Deaths**

There were 38\* stillbirths during the year certified by:

(a) Doctors ... 33 (b) Midwives ... 5

Autopsies were held on 15 of the 38 stillbirths.

\* (39 stillbirths were allocated to the borough by the Registrar General).

#### **1. (a) Direct Causes of Stillbirths:**

Rhesus incompatibility ... ..	3
Gross foetal abnormalities ... ..	7
Maceration ... ..	7
Breech delivery (p.m. inhalation of meconium— atelectasis) ... ..	1
Intracranial haemorrhage and birth trauma ... ..	2
Asphyxia and anoxia ... ..	9
Placental insufficiency ... ..	2
Accidental haemorrhage (ante-partum haemorrhage) ...	3
Prematurity ... ..	3
Early separation of placenta in twin pregnancy ... ..	1



### 1. (b—c) **Antecedent causes**

Accidental haemorrhage ... ..	4
Placental insufficiency ... ..	2
Toxaemia of pregnancy ... ..	5
Prematurity ... ..	1
Difficult breech delivery ... ..	1
Hydramnios and malformation ... ..	1

### 2. **Other Significant Conditions.**

Hypertension ... ..	3
Epilepsy ... ..	1
Cord round neck ... ..	1
Immaturity ... ..	1
Toxaemia of pregnancy ... ..	1
Prematurity ... ..	1

### **Infant Deaths**

Total deaths under 12 months ... ..	36
Neonatal deaths (deaths under 28 days) ... ..	24
Early neo-natal deaths (Deaths under one week) ... ..	21
Other infant deaths (1 month—12 months) ... ..	12

### **Early neo-natal deaths**

#### 1. (a) **Direct causes**

Prematurity ... ..	4
Atelectasis ... ..	6
Congenital abnormalities ... ..	3
Cerebral haemorrhage ... ..	4
Cerebral anoxia and asphyxia ... ..	2
Pneumonia ... ..	1
Pneumothorax and pneumoperitoneum ... ..	1
	<hr/>
	21
	<hr/>

#### 1. (b—c) **Antecedent Causes**

Prematurity ... ..	3
Intra-uterine anoxia ... ..	1
Aspiration of meconium during forceps delivery ... ..	1
Rupture of stomach following intragastric oxygen ... ..	1
Rupture of tentorium cerebelli ... ..	1
Pulmonary atelectasis ... ..	1

#### 2. **Other significant Conditions.**

Cerebral oedema ... ..	1
Caesarian Section ... ..	1

### **Neo-natal deaths (Deaths 7—28 days)**

#### 1. (a) **Direct Causes**

Broncho-pneumonia ... ..	2
Meningitis ... ..	1
	<hr/>
	3
	<hr/>



1. (b—c) <b>Antecedent Causes</b>									
Intestinal obstruction due to imperforate anus ... ..									1
Cleft palate ... ..									1
2. <b>Other significant conditions</b>									
Congenital heart disease ... ..									1
<b>Other infant deaths (1 month—12 months)</b>									
1. (a) <b>Direct causes</b>									
Bronchopneumonia ... ..									7
Meningitis ... ..									1
Congenital Heart Disease ... ..									2
Uraemia ... ..									1
Spina bifida ... ..									1
									<hr/> 12 <hr/>
1. (b—c) <b>Antecedent Causes</b>									
Spina bifida and meningocele ... ..									1
Acute nephritis ... ..									1
Pulmonary atelectasis ... ..									1
2. <b>Other significant conditions</b>									
Prematurity ... ..									1

**Child Welfare Clinics**

These clinics seem to retain their popularity in Wallasey, even though many family doctors have started their own afternoon baby clinics for the benefit of their patients, who naturally do not like sitting in the surgery with ill adults, at inconvenient times, such as a crowded evening surgery.

Most women, today, know something about Maternity and Child Welfare Clinics and those who know them well, usually have a high regard for the care and guidance they have received from the health visitors and the clinic doctors, all of whom take the greatest pride in this work, and strive to produce a friendly atmosphere in which mothers can discuss their problems before and after a confinement. There are very few mothers of young babies, and especially mothers who are themselves young, who do not feel at some time, the need of expert advice on baby's progress.

Visits to the clinics do tend to fall off after the early months of childhood. If the growing child is well, and is apparently making good progress, many mothers see no need for such frequent visits and examinations, but they are quite happy to attend the "toddler's" clinics, by appointment, at the age of 2, 3 and 4 years, at which physical and mental progress is checked and early defects are detected and dealt with, in collaboration with the family doctor.

Today every doctor's aim should be to attain, maintain and improve physical, mental and emotional health and that is the reason why regular routine checks are so important.

A great deal of our work in the local health departments at present is concentrated on immunisation and initiating protective measures against smallpox, diphtheria, tetanus, whooping cough, poliomyelitis and tuberculosis.

The earlier any physical or mental handicap is detected the better, and the staff have a unique opportunity of detecting such defects as phenylketonuria (a rare metabolic disease which causes severe mental retardation), congenital dislocation of the hip, strabismus, cerebral palsy, foot defects and defects of vision and hearing. These are all conditions which are unlikely to attract the attention of the family doctor, because they are so often unnoticed by the parent and it is therefore in this field of preventive medicine that the clinics are able to give good service.

At the Maternity Child Welfare Conference a number of delegates suggested that Assistant Medical Officers of Health and Health Visitors should attend Refresher and Training Courses in Mental Health because they so frequently come up against the psychological problems involving the parent-child relationship—problems not urgent enough to require the services of a psychiatrist or even the family doctor but something that requires psychiatric first-aid which Assistant Medical Officers with their fairly considerable experience of mental health should be qualified to give, providing they were kept up to date with child guidance work. This suggestion met with unanimous agreement.

Since the supply of Cod Liver Oil and Orange Juice is no longer free to children under 5 years of age, the distribution of these valuable vitamins in this form has of course fallen very considerably, but I think that it is more than off-set by an increase in the sale of other types of vitamins. Cod Liver Oil has never been popular with either children or parents, but the use of proprietary brands of vitamins in the form of drops is probably quite as effective and now more universally prescribed; the same applies to the Orange Juice as supplied by the Ministry — I have found Rose Hip Syrup a much more popular and effective substitute. The Staff have detected no deterioration in the health of the children since the changes were made.

Our thanks are once again given to the voluntary helpers at the Child Welfare Clinics who come along so regularly and assist with the weighing, charting, and the making of tea for the mothers, thereby enabling the Health Visitors to give more time to the more valuable aspect of welfare work, namely Health Education and mothercraft talks.

The Clinics at which a doctor attends on each occasion are held, in the afternoon of the following days (2-0 p.m.—4-30 p.m.):—

Health Clinic, Water Street ... ..	Tuesdays
Health Clinic, Oakenholt Road, Moreton ...	Tuesdays
Parish Hall, Wallasey Village ... ..	Wednesdays
Trinity Church Hall, Manor Road ... ..	Thursdays
Congregational Church Hall, Princess Road	Thursdays
Leasowe Hospital ... ..	1st, 2nd and 4th Wednesday in month.



The number of attendances during the year was :

	Water Street	Moreton	Princess Road	Wallasey Village	Trinity Hall Liscard	Leasowe Hospital	Totals
Children under one year of age	2,351	2,647	2,374	2,878	1,682	437	12,369
Children between one and five years	863	522	714	828	882	322	4,131

#### Toddlers' Clinic

Number of Sessions held ...	...	...	...	...	...	...	23
Number of children called up ...	...	...	...	...	...	...	555
Number who attended ...	...	...	...	...	...	...	289*

(\*This number is included in Moreton Child Welfare Clinic figures)

#### Distribution of Welfare Foods

Welfare foods, i.e., National dried milk, cod liver oil, orange juice and vitamin tablets were distributed, from the following points during the year :—

25a Liscard Village; Boys Club, Vernon Ave.; Health Clinic, Moreton; Water Street Clinic, and at the clinics held in Wallasey Village Parish Hall, Princess Road Church Hall and Leasowe Hospital.

The following table shows the amounts of welfare foods which have been distributed during the years 1956 to 1961 inclusive :—

	1956	1957	1958	1959	1960	1961
NATIONAL DRIED MILK						
Number of packets given free ...	506	512	695	1,244	1,262	1,023
„ „ sold ...	46,644	38,127	31,110	29,125	25,553	24,345
COD LIVER OIL, ORANGE JUICE, ETC.						
Number of bottles of :						
Cod Liver Oil ...	11,154	9,252	5,257	5,168	5,396	3,866
Vitamin Capsules ...	5,313	5,150	4,539	5,022	5,031	3,962
Orange Juice (Free) ...	487	624	65	2	30	885
„ „ (Sold) ...	78,823	81,771	48,139	47,842	46,115	29,052

During the year the number of packets of dried milk (other than National dried milk), cereals, etc., sold at the Clinics was 24,906 realising a total of £3,333 3s. 7d., compared with 17,999 packets sold in 1960 which realised £2,393 14s. 4d.



**Priority Dental Services**

The following tables give particulars with regard to the dental care of expectant and nursing mothers, and children under school age : —

- (a) Number of officers employed at the end of the year on a salary basis in terms of wholetime officers to the maternity and child welfare service.

Principal Dental Officer ... ..	$\frac{1}{8}$ th
Dental Officers ... ..	$\frac{3}{8}$ ths.

- (b) Number of officers employed at the end of the year, on a sessional basis, in terms of wholetime officers to the maternity and child welfare service ... .. Nil
- (c) Number of dental clinics in operation during the year 4
- (d) Number of sessions (i.e., equivalent complete half days) devoted to maternity and child welfare patients during the year ... .. 85

NUMBERS PROVIDED WITH DENTAL CARE:—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	200	173	101	65
Children under Five ...	253	236	206	206

FORMS OF DENTAL TREATMENT PROVIDED

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers	18	33	—	—	327	57	19	34	3
Children under Five	—	36	—	—	196	158	—	—	—

## Day Nurseries

The charges for the attendance of children at the Day Nurseries in those instances where both parents are working were increased, to 11/9d. per day as from 1st May, 1961.

The statistics indicate that the number of attendances for the year are slightly higher than for the previous year. Waiting lists have however, been reduced to negligible proportions and the majority of children in attendance are at the fee of 2/6d. (i.e. one parent working) or at the special rates decided by the Day Nurseries Charges Sub Committee having regard to the particular circumstances of each case. Those who do attend are usually necessitous cases, or short stay cases where mother is ill, or having another baby, and for these, the fee of 2/6d. per day is very reasonable indeed.

The number of children who attend the three day nurseries fluctuates considerably depending on the weather, the time of year, the school holidays, epidemics and the state of employment.

All the children are happy, well-fed and well cared for, and their physical and mental well-being is the prime concern of the matrons and their trained nursery staff.

Nursery nursing is still a very popular career and, the department is inundated with requests from girls about to leave school (in Birkenhead as well as Wallasey) who wish to take the training for the Diploma of the National Nursery Examination Board. Unfortunately many of these have to be refused as there are vacancies for only three students at each of our two training Nurseries, and the duration of the course is two years. The examination results continue to be very satisfactory and each year, as a rule, three girls qualify as nursery nurses. Sometimes the department is able to absorb them, but more frequently they have to go to other nurseries, or to private posts, or to go to hospitals where they train to be State Registered Nurses.

Immunisation against whooping cough, diphtheria, tetanus and poliomyelitis is offered to all the children at the nurseries, and is rarely refused—in fact, the mothers are secretly rather relieved that they need not be present when their precious babes receive their “jabs”.

Undoubtedly the three day nurseries in the borough are still performing a useful social function.

Details of attendances during the year are as follows:—

Nursery	Number on Register 31/12/61	Number of Places	Average Daily Attendances	
			0—2's	2—5's
Eastway ... ..	26	30	5.1	17.3
Central Park ... ..	41	50	17.4	22.8
Oakdale ... ..	43	50	9.1	28.0

## Mother and Baby Homes

There is not a sufficient number of mothers seeking admission to such homes to justify the Council maintaining a Home for this purpose.

Contributions are made where necessary to the maintenance of unmarried mothers and illegitimate children admitted to suitable mother and baby homes.

During 1961 contributions were made in respect of five cases. The department works in close liaison with the Birkenhead and Wirral Moral Welfare Association and the Chester Diocesan Board of Moral Welfare.



### **Nurseries and Child Minders Regulations Act, 1948**

An application was received during the year for registration of further premises as a day nursery. Following inspection, the premises were found to be satisfactory and registration was approved in accordance with the above regulations. There were thus two day nurseries on the register at the end of the year. Routine inspections were made and advice given.

An application was received from one person that she be registered as a "child minder". The application was granted.

## **SECTION 23 — MIDWIFERY SERVICES**

### **Domiciliary Midwifery**

Dr. E. I. Grant, Assistant Medical Officer of Health and Medical Supervisor of Midwives makes monthly inspections, and reports as follows.—

"The domiciliary midwifery service has worked smoothly with a minimum amount of sickness to interfere with the duty rota and holidays, but when these holidays are increased to six weeks per annum, as from January 1st, 1962, it will be increasingly difficult to fit everything in; and the appointment of an additional midwife may have to be considered. We now have four midwives with car allowances and this undoubtedly has helped to ease the situation in Leasowe, New Brighton and Moreton where mobility is so important.

The term "maternity nurse" has now disappeared from the handbook of the Central Midwives Board, and this has simplified considerably the annual returns to the Ministry of Health, and raised the status of the midwife, with whom it was always a bone of contention. If the doctor was present at the birth of the child, even if he only looked on whilst the midwife delivered the baby, then she was described as a "maternity nurse", but if the doctor arrived after the delivery of child, and placenta then she rose to the position of midwife.

The following are details of births during 1961:—

Highfield	...	...	...	...	1,266
Domiciliary	...	...	...	...	427
Domiciliary outside Borough	...				2
Institutions outside Borough	...				221
					<hr/> 1,916 <hr/>

Of these 46 were in respect of persons normally resident outside the Borough.

The number of domiciliary births shows a decrease of 20 on 1960's figure of 447, whereas Highfield's figure of 1,266 shows an increase of 26 compared with 1960 figures.

To enable "Highfield" to admit an increasing number of cases, patients are being discharged earlier to their own homes, sometimes as early as the 4th day but more often about the 8th or 9th day, and our midwives are having to continue their nursing treatment there. Thus, though our midwives show fewer cases actually delivered on the district, the number of visits to post-natal cases has increased and it is no longer always possible for them to complete these daily visits by lunch-time, as each one may take as much as an hour, if the baby has to be bathed and the mother examined, and made clean and comfortable.

It will be noted that out of the 1,916 births, 1,487 took place in Highfield and other hospitals or institutions outside the Borough, i.e.

about 77% of the total births took place in hospital. Since, in the Cranbrook report, it was recommended, and accepted by the Government, that not less than 70% of all confinements should be conducted in maternity units in hospital, it will be seen that Wallasey has been able to fulfil this recommendation.

The emotional and psychological needs of the mother during her pregnancy and labour have recently received much publicity, and the maternity services came in for widespread criticism, but, as always, the spotlight has fallen on a minority of cases who may have received inconsiderate treatment, whereas the majority receive the utmost sympathy and support from the attendants. It is undoubtedly important that doctors and midwives must be trained to observe, record and control the psychological changes, as capably as they manage the physical changes, but, as medical supervisor of midwives in Wallasey for some 14 years I have yet to receive a complaint from a mother that she received anything but the kindest and most considerate treatment from any of our domiciliary midwives.

Two midwives attended Refresher Courses during 1961 and these compulsory courses are invaluable in helping to keep our maternity services up-to-date. Any new ideas are noted and discussed, and if possible put into practise. Consideration is being given to the introduction of disposable syringes; suppositories are on trial to replace the old-fashioned soap and water enemas. Husbands are allowed to be with their wives during the actual labour, if this is desired by *both* parties and is acceptable to the general practitioner in charge of the case.

Our monthly meetings are still functioning very successfully, and it gives me an excellent opportunity of discussing any problems or sore point with all the midwives together, rather than with each individually. I think we all enjoy these meetings and find them very profitable.

I am very grateful to Mrs. Schofield, the Superintendent Health Visitor, for shouldering the daily burden of administration, she is available in her office to receive the frequent 'phone calls from the midwives, and she solves the day-to-day problems which arise, yet keeps me informed of any emergencies.

It was not necessary to seek medical aid under Section 14 (1) of the Midwives Act, 1951, in respect of any of the domiciliary confinements.

No midwives notified their intention to practise privately during the year.

### **Maternity Outfits**

Maternity outfits are supplied free of charge on request to the Public Health Department, or to the midwife in attendance for all domiciliary confinements.

The number of maternity outfits issued during the year was 432.

### **Maternity Emergency Unit**

The Corporation has an arrangement with St. Catherine's Hospital, Birkenhead, for the use in Wallasey of the Maternity Unit "Flying Squad" for dealing with difficult domiciliary obstetric emergencies.

It was necessary to call upon the services of the Unit five times during 1961 for maternal cases and once for the baby (Paediatric Flying Squad) on account of cold syndrome.

### **Maternity Homes**

There are no private maternity homes registered in the borough.



# NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR

	DOMICILIARY CASES					Totals	Cases in Institutions
	Doctor not booked		Doctor booked				
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child (either the booked Doctor or another)	Doctor not present at time of delivery of child			
(a) Midwives employed by the Authority ... ..	—	—	244	182	426	—	
(b) Midwives employed by Voluntary Organisations:—							
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 ... ..	—	—	—	—	—	—	
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ... ..	—	—	—	—	—	—	
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ... ..	—	—	—	—	—	1,273	
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes) ... ..	—	—	—	—	—	—	
Totals ... ..	—	—	244	182	426	1,273	



## SECTION 24 — HEALTH VISITING

Mrs. Schofield, Superintendent Health Visitor makes the following observations:—

“The routine work of the Health Visitor has carried on untiringly during 1961. Work amongst mothers and young children still takes priority. Much time, however, is spent on the welfare of the elderly people and also families with “special” problems. Promotion of good mental health is in the forefront of the Health Visitor’s mind during her domiciliary visiting.

The Child Welfare Centres continue to be well attended, despite the fact that many general practitioners hold their own clinics. This is most encouraging to the health visiting staff.

Health Education is carried out on quite a satisfactory scale, considering what little time the Health Visitors can give to this tremendously wide subject. The mothers who attend Centres receive help and advice on all health matters—either through group teaching or to individual mothers. Small exhibitions on current health topics are shown in 3-D by the use of peg boards. Leaflets and posters are also displayed. There are many mothers whom we would like to see attending our Centres, but do not do so. It is this nucleus, who can only receive health education by domiciliary visiting. The opinion amongst all the Health Visitors is that personal communication is still the best method and this we continue to do in the peoples own homes. The importance of prophylactic measures, which are available to the public at large, is pointed out to all with whom the Health Visitors come into contact. In the Autumn, during National Fire Prevention Week in conjunction with the Chief Fire Officer, we held an Exhibition in the Civic Hall. The topic was “Hazards in the Home, especially for the Very Young and the Elderly.”

In March, 1961, we started a Mothers’ Club in Moreton Health Clinic. This venture has proved a huge success, due in great measure to the enthusiasm of the Moreton Visiting staff. The Club meets fortnightly. Once a month we have a guest speaker who talks on a variety of subjects—some educational and some in a lighter vein. The evenings are enjoyed by the mothers, who have elected a Committee, including a Chairman, Secretary and Treasurer and not the least important “two tea-makers”. Everyone is becoming more communicative and exchanging ideas regarding “family life”, “health”, “what is an Ideal Husband if one ever exists?” etc., etc. The average attendance is 30 members.

The Phenistix testing for phenylketonuria, continues to be carried out, on babies between 6—8 weeks. I am pleased to report we have not had one positive reaction.

Tests for ascertaining deafness of young children in the “risk” groups are done by the Health Visitors. We keep a register of all infants in this group. If we find a child who does not respond satisfactorily after two tests, he or she is referred to the family doctor. He will then take the necessary steps to obtain treatment.

Finally, may I thank the Health Committee for allowing attendances at Refresher Courses, we appreciate these Courses immensely. They are most important if one is to keep up-to-date with changing ideas and attitudes towards physical and mental health.”

## **Arrangements for health visitors to work in conjunction with a particular general medical practitioner or group of practitioners.**

During the year a request was made by one General practitioner to the Medical Officer of Health for the assistance of a Health Visitor during his weekly ante-natal clinic. This is a small beginning—a step in the right direction.

The Health Visitor attending this clinic gives advice to the ante-natal mothers on all aspects of health. The General Practitioner is able to give more time clinically to his patient because of the presence of the Health Visitor.

I am pleased to report that at the time of writing two other General Practitioners have asked for our co-operation in a similar manner.

There has recently been a special meeting of the Local Medical Committee to consider the proposals of the Authority in connection with the ten-year expansion of the health services, and this meeting afforded an excellent opportunity of discussing the ways in which such co-operation could be achieved between the general practitioners and the Local Health Authority. All the health visitors are encouraged to call upon the general practitioners to discuss problems relating to patients.

The following is a summary of work done by the Health Visitors during the year:—

Total visits to children under 1 year	...	...	...	...	...	8,631
Total visits to children between 1 and 5 years	...	...	...	...	...	12,711
Total visits to Premature Births	...	...	...	...	...	161
Total visits re Stillbirths	...	...	...	...	...	18
Total visits re Neo-Natal Deaths	...	...	...	...	...	12
Total visits re Infant Deaths	...	...	...	...	...	8
Total visits re Infectious Diseases and contacts	...	...	...	...	...	764
Total visits to Dysentery cases	...	...	...	...	...	448
Total visits to Ophthalmia cases	...	...	...	...	...	3
Total visits to Day Nurseries	...	...	...	...	...	62
Total visits re Immunisation	...	...	...	...	...	66
Total visits for Children's Officer	...	...	...	...	...	20
Total visits re Adoptions	...	...	...	...	...	4
Total visits for Hospital Almoners	...	...	...	...	...	11
Total visits to Expectant Mothers	...	...	...	...	...	1,250
Total visits to Post-Natal cases	...	...	...	...	...	264
Total visits re Tuberculosis	...	...	...	...	...	1,673
Total visits to Diabetics, per General Practitioners	...	...	...	...	...	3
Total visits re Care of Old People	...	...	...	...	...	378
Miscellaneous visits	...	...	...	...	...	1,045
						<hr/> 27,532
Ineffectual visits (no response, etc.)	...	...	...	...	...	3,080
						<hr/> 30,612



## Attendances at Junior Training Centre for :—

Medical Inspections ... ..	11
Cleanliness Surveys ... ..	1
	<hr/>
	12
	<hr/>

## Attendances in School by T.B. Health Visitors re B.C.G.

vaccination ... ..	75
Home visits re B.C.G. vaccination ... ..	49
	<hr/>
	124
	<hr/>

Attendances at Consultant Psychiatrists' Clinic ... ..	5
Attendances at Birkenhead Children's Hospital ... ..	41
Attendances by T.B. Health Visitors at Mill Lane Chest Clinic	75
Highfield Premature Baby Clinic ... ..	44

### Arrangements for Health Visitors to follow up the Cases of Persons discharged from Hospital.

The visiting of mothers and their young babies subsequent to discharge from the Maternity Hospital has always been the role of the health visitor. Close liaison exists between the General Practitioner Maternity Unit in this borough and the Health Department, and details are received by telephone of all early discharges in order that the home visit may be made immediately after discharge.

There are two tuberculosis visitors employed by the authority who work from the Chest Clinic, Mill Lane, Wallasey. Close liaison thus exists with the Tuberculosis Officer and also the Consultant Chest Physician. The tuberculosis visitors make visits to the hospitals where necessary to arrange after care on discharge of the patient to his or her home. It is in these two spheres that the closest link between hospital treatment and local authority after care work is apparent.

The health visitors attend the Paediatrician's ward round at the Birkenhead Children's Hospital on a rota system, and this enables them to follow-up the Wallasey children when discharged. During the year they made 44 attendances at the Paediatrician's Premature Baby Clinic which is held at Highfield Hospital. In addition, a visit was arranged of health visitors and midwives to the well-equipped, premature baby unit at St. Catherine's Hospital, Birkenhead.

There is no specialist health visitor engaged on follow up work in this borough but each health visitor visits the patients on her own district as requested by hospital specialists or almoners, but the number of cases referred has been disappointing.

Mental welfare officers visit psychiatric hospitals and plan in advance such after care measures as are necessary.

The welfare officer for physically handicapped persons attends to the long term after-care of the severely handicapped and arranges for household adaptations and the acquisition of suitable gadgets, etc.



## SECTION 25 — HOME NURSING

Miss E. Fairless, Superintendent of the District Nursing Service reports as follows:—

“The Nursing Staff continued at full strength throughout the year, the establishment remaining one Superintendent and nineteen Nurses.

Although there has been a slight decrease in the number of patients nursed, and more acute work undertaken, the day to day work of the district nurses lies largely with the care and nursing of the elderly. So far as nursing is concerned, there is little difference from general adult nursing, but the care of old people presents many problems, and can be difficult, heavy, and exacting. Nevertheless this work is very rewarding and the staff have all worked most cheerfully and willingly.

The Superintendent and Nurses greatly appreciate the help and support of the General Practitioners, the Hospitals, and other workers in the Public Health field—this has contributed in no small measure to the smooth running of the service.

The appointment of a Bath Attendant in October has fulfilled a great need, and up to the end of December 477 visits were paid to 45 infirm people requiring weekly baths.

Messages are taken at the Nursing Centre from 8 a.m. to 9 p.m. daily and from 9 a.m. to 9 p.m. on Sunday. One Nurse is on duty each evening for emergency calls and late evening visits to very ill patients.

During the year 299 evening visits have been paid to very ill patients and patients requiring emergency treatment.

The introduction of the five day working week is most popular and has undoubtedly helped to reduce the sickness rate amongst the staff.

The staff are most grateful to the Health Committee for the allowances granted to nurses using their own cars and scooters on duty. This has proved a great saving of the Nurses' time and energy, and most helpful in their work.

The training of student district nurses has continued throughout the year. Four students entered for training, two were successful in the examination and gained the National Certificate granted by the Ministry of Health in addition to the Certificate of the Queen's Institute of District Nursing, and two are awaiting the results of the examination.

Heavy demands have been made on the laundry service for incontinent patients. This service is of valuable assistance both to the nurses and relatives of the patients and without it many of these patients could not be nursed at home.

In November the Superintendent and three Nurses attended a one day Refresher Course arranged by Lancashire County Council, at

St. Annes, and are most grateful to the Health Committee for giving them the opportunity to attend this Course which they found most stimulating and useful."

The following is a summary of work carried out by the District Nursing Service in 1961.

	Cases	Visits
Medical ... ..	1,127	34,826
Surgical ... ..	232	7,804
Tuberculosis ... ..	40	2,368
Infectious ... ..	4	19
Maternal Complications ... ..	11	80
Others ... ..	145	284
Totals ... ..	1,559	45,381
Patients included in above who were 65 years or over at the time of first visit ... ..	1,008	30,510
Children included in above who were under 5 years at the time of first visit ... ..	20	419
Patients who have had more than 24 visits during the year ... ..	414	36,286

The above figures include 10,811 visits paid to 312 patients for the purpose of giving injections only. The comparable figures for 1960 were 9,951 visits to 280 patients.

## NURSING HOMES

There were two Nursing Homes on the Register at the end of 1961. 33 deaths occurred in the Homes during the year.

Eight visits were paid to the Nursing Homes by the Superintendent Health Visitor.

## SECTION 26—VACCINATION AND IMMUNISATION

### General.

A great deal of our work in the local health departments at present is concentrated on immunisation and initiating protective measures against smallpox, diphtheria, tetanus, whooping cough, poliomyelitis and tuberculosis, and recently one of the national "time tables" (Schedule P) for these measures has been adopted. As early as two months the baby is given its first injection against diphtheria, whooping cough and tetanus, followed at monthly intervals by two others; at five months the baby is vaccinated against smallpox, and at seven to eight months receives two injections against poliomyelitis. Then, at or about, fifteen to eighteen months the child receives the third dose of polio vaccine, and a re-inforcing dose of the diphtheria, whooping cough and tetanus vaccine which gives immunity until school entry, when another dose is given.

Details have been received from the Ministry of Health of the vaccination and immunisation statistics as at the 31st December, 1961, in respect of local health authorities in England and Wales.



The percentages in this borough are as follows:—

Smallpox ... 36%

(The number of children under 1 year of age vaccinated during 1961, expressed as a percentage of the live births during the 12 months ended 30th June, 1961).

Whooping Cough ... 61%

(The total number of children born in 1960 and 1961 and vaccinated during 1961 expressed as a percentage of the live births during the 12 months ended 30th June, 1961).

Poliomyelitis ... 81%

(Persons born in years 1943 to 1961 who have been vaccinated since vaccination started).

Diphtheria (0—4 years) ... 61%

(0—14 years) ... 42%

(Percentages of the under 5 and under 15 population estimated to have been immunised during the year 1957—1961).

The figures on the whole reflect a reasonably high level of protection and compare favourably with those relating to other towns. There are, however, no grounds for complacency and the importance of vaccination and immunisation cannot be over-emphasised.

The number of children who have received “booster” injections against diphtheria could be much improved.

### Smallpox Vaccination

General Practitioners in the borough notified that they had carried out 932 vaccinations and 244 re-vaccinations during the year, compared with 986 vaccinations and 238 re-vaccinations in 1960.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number vaccinated ...	661	131	34	43	63	932
Number Re-vaccinated	1	—	7	29	207	244

### Poliomyelitis Vaccination

A further expansion of the vaccination programme occurred during 1961. In addition to offering vaccination to all persons over the age of six months and under the age of 40, the scheme was extended so as to offer a 4th injection to those children about to enter school, (normally at the age of 5) and also to children between the ages of 5 and 12 who are already at school.

A most intensive publicity campaign was carried out in the early part of the year stressing the importance of vaccination. Impetus was given to the campaign with the notification of several cases of



poliomyelitis on Merseyside. Evening clinics were organised at the Health Clinic, Water Street, Wallasey and the Health Clinic, Oakenholt Road, Moreton, in order to satisfy the large number of persons requesting vaccination.

A total of 13,464 persons received a primary course of vaccination and 4,261 received "booster" injections. In addition fourth injections were given to 6,239 school children in the special age group.

During the campaign no difficulty was experienced in obtaining sufficient supplies of vaccine and the Ministry of Health were most co-operative in this respect. From October, until the end of the year vaccine was in very short supply, as a result the Ministry recommended the postponement of "Booster" doses from the seventh to the twelfth month after receiving the second injection. Of the 13,464 persons who received a primary vaccination 6,897 were vaccinated by their family doctor and 6,567 attended the local health authority clinic.

Of the 4,261 persons receiving a "booster" dose 3,099 were vaccinated by their family doctor and 1,162 attended the local health authority clinic. 3,395 children received their "fourth" injection from their family doctor and 2,844 attended the local health authority clinic.

Number of children vaccinated during  
the year—by age group (as at 31.12.61).

Age	Primary Vaccination	3rd Injections (Booster Dose)	4th Injections
Under 1 yr.	... 192	... —	... —
1 yr. +	... 1268	... 302	... —
2 yrs. +	... 658	... 565	... —
3 yrs. +	... 343	... 240	... —
4 yrs. +	... 278	... 125	... 73
5 yrs. +	... 221	... 142	... 721
6 yrs. +	... 213	... 109	... 720
7 yrs. +	... 203	... 115	... 727
8 yrs. +	... 190	... 76	... 774
9 yrs. +	... 165	... 88	... 775
10 yrs. +	... 160	... 85	... 778
11 yrs. +	... 180	... 87	... 792
12 yrs. +	... 188	... 74	... 879
13 yrs. +	... 176	... 81	... —
14 yrs. +	... 206	... 81	... —
15 yrs. +	... 215	... 98	... —
16 yrs. +	... 65	... 38	... —
Totals ...	4921	2306	6239

Further details are given in the table on Page 45.

### **B.C.G. Vaccination (Tuberculosis)**

Full details of this service are given on page 50 in the section of the report "Prevention of Illness — Care and After-Care."

### **Diphtheria Immunisation**

During the year 1,797 children received the full course of immunisation against diphtheria, 1,251 being immunised by general practitioners and 546 at the Council's clinics. In addition, 925 children who had previously received the full course were given a reinforcing dose, 528 by general practitioners and 397 at the clinics.

Further details of the number of children immunised are given in the table on Page 46.

### **Whooping Cough Immunisation**

Triple antigen is used for immunisation and a single course of injections thus gives immunity to diphtheria, whooping cough and tetanus.

The following table gives details of the number of persons who received the course of immunisation against whooping cough during the year :—

	<i>Age at date of final injection</i>		
	<i>0-4 yrs.</i>	<i>5-14 yrs.</i>	<i>Total</i>
No. of children who have completed a primary course (normally 3 injections of pertussis vaccine singly or in combination) in the authority's area during the year ended 31st December, 1961.	1,469	182	1,651

The total number of persons immunised against the disease in the previous three years was as follows:—

1958	...	1,376
1959	...	982
1960	...	1,720

# POLIOMYELITIS VACCINATION—1961

	PRIMARY VACCINATION			BOOSTER DOSES		
	Type of Vaccine			Type of Vaccine		Total
	British	Salk	British/ Salk	British	Salk	
Children—Male (16 yrs. and under) ...	2,527	3	15	1,145	13	1,158
Children—Female (16 yrs. and under) ...	2,368	2	15	1,135	22	1,157
Expectant Mothers ... ..	128	1	1	12	—	12
17-25 Yrs and others including Hospital Staff ... ..	1914	2	1	535	9	544
Adults 26-40 Yrs. ... ..	4,627	1	5	1,197	62	1,259
Others ... ..	1,852	—	2	126	5	131
Total ...	13,416	9	39	4,150	111	4,261

Total number of persons receiving primary vaccination — 13,464

Total number of persons receiving Booster vaccinations-4,261



DIPHTHERIA IMMUNISATION  
TABLE SHOWING NUMBER OF CHILDREN IMMUNISED—BY AGE GROUPS

Age	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	Total under 5 yrs. of age at 31/12/61 5,126
Under 1 year ...	140	67	86	47	73	86	60	135	134	191	102	188	79	353	352	5,126
1 year +	635	865	740	772	762	718	621	770	700	705	667	851	651	950	813	
2 years +	78	279	181	229	236	232	172	277	160	177	149	197	151	203	176	
3 years +	47	75	77	85	71	71	64	89	97	70	44	77	49	79	99	
4 years +	25	33	38	55	46	44	42	62	61	48	26	40	18	63	79	
5 years +	32	54	31	42	56	52	48	48	52	54	32	22	19	46	46	5,991
6 years +	26	43	23	33	34	65	49	45	46	44	26	22	20	35	45	
7 years +	9	7	10	12	11	22	20	20	17	16	15	21	5	28	53	
8 years +	8	4	3	5	5	8	6	10	14	10	4	4	4	22	17	
9 years +	7	7	6	9	7	5	4	6	11	10	6	4	4	22	18	
10 years +	7	11	4	3	6	8	8	10	4	9	3	4	2	11	18	6,723
11 years +	5	5	3	3	7	—	20	7	17	7	7	6	4	10	14	
12 years +	3	4	1	3	10	3	6	2	8	8	1	8	1	11	16	
13 years +	5	3	—	—	2	—	—	—	1	4	1	2	—	6	16	
14 years +	1	1	1	1	1	2	—	—	—	3	—	1	—	5	11	
15 years +	—	—	—	1	—	1	—	2	2	1	—	—	—	1	8	
Over 16 years	—	1	2	1	1	4	—	—	1	—	1	2	2	8	16	
Total ...	1,028	1,459	1,206	1,301	1,328	1,321	1,120	1,483	1,325	1,357	1,084	1,449	1,009	1,853	1,797	

## SECTION 27 — AMBULANCE SERVICE

The ambulance service has continued on very much the same lines as in previous years, the day-to-day administration being carried out by the Chief Fire Officer, subject to the overall control of the Medical Officer of Health.

All vehicles and staff operate from the Central Fire Station, Liscard Village, and to serve the needs of the Moreton area of the borough from which many cases are conveyed, two vehicles are despatched to the Super Garage, Moreton, where accommodation is provided for vehicles and personnel. A direct telephone line is installed from the Central Fire Station and constant touch is maintained through this and through the radio telephone sets fitted to all vehicles.

Active consideration is being given to the possibility of a purpose built ambulance station being provided in the Moreton area, and provision has been made in the Council's Five-Year Building Programme.

Once again the number of cases conveyed shows an increase over the previous year — 35,660 compared with 34,896 in 1960.

The heavy demands made on the ambulance services at times exceed their carrying capacity and the service is stretched to the limit at peak periods.

The following are details of cases carried over the past years:—

1947 —	3,854	1959 —	33,073
1950 —	21,385	1960 —	34,896
		1961 —	35,660

The Secretary of the North Wirral Hospital Management Committee arranged during the year for notices to be displayed in all out-patient departments of the hospitals stressing that ambulances and sitting case cars cannot be provided to convey a patient to and from hospital if the patient is able to undertake the journey on foot or by public conveyance.

A full report was submitted to the Health Committee setting out the difficulties being encountered in running the service. Arising from this report the establishment was increased by an additional three driver/attendants as from December, 1961, the total at the year end being 27. In addition, communication clerks are employed on combined Fire Brigade and Ambulance telephone duties.

A replacement stretcher case vehicle and also a replacement sitting case vehicle were ordered during the year. The vehicular strength at the 31st December, 1961, was as follows:—

- (a) Seven ambulances each capable of conveying 2/4 persons in emergency;
- (b) Two omni-coaches for sitting cases each capable of carrying 13 persons;
- (c) One car for long distance journeys.

The total mileage covered during the year was 152,850 compared with 158,279 in the previous year.

Gas and air (analgesia outfits) are available for the domiciliary midwives, when required, and are stored at the Central Fire Station.



## AMBULANCE SERVICE—NUMBER OF CASES CONVEYED—1961

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total
Maternity ...	68	56	63	59	56	51	62	63	52	51	51	72	704
Mortuary ...	3	2	—	1	3	1	1	2	1	—	—	—	14
Sudden Illness	44	27	41	21	49	64	45	48	45	65	48	47	544
Works and Street Accidents ...	109	98	123	129	176	169	150	177	130	84	95	125	1,565
Mental ...	20	25	15	9	18	14	13	11	19	10	19	12	185
Infectious Diseases ...	8	2	8	12	8	5	8	2	4	3	6	1	67
Malicious False Alarm and False Alarm ...	—	—	—	—	2	—	1	—	—	—	—	1	4
Other cases	2,785	2,485	2,989	2,676	2,848	2,920	2,804	2,492	2,481	2,830	2,900	2,367	32,577
Totals ...	3,037	2,695	3,239	2,907	3,160	3,224	3,084	2,795	2,732	3,043	3,119	2,625	35,660
Mileage	13,239	12,799	13,086	12,577	11,510	15,492	12,974	12,435	11,868	12,846	12,652	11,372	152,850



## SECTION 28 — PREVENTION OF ILLNESS, CARE AND AFTER-CARE

### Tuberculosis

No. of Primary	1961	1960	1959	1958	1957	1956	1955	1954	1953
Notifications	50	78	84	77	66	83	91	95	104
Pulmonary		45	= 28 men		14 women			3 children	
Non-pulmonary		5	= 1 man		4 women				

### Classification of Non-pulmonary cases

Glands in neck ... ..	2	Renal Tract ... ..	1
Cervical Gland ... ..	1	Abcess of breast ... ..	1

### Table of Primary Notifications

	Notifications		Deaths		Death Rate
	Pul.	Non-pul.	Pul.	Non pul.	per 1,000 pop.
1961	45	5	11	—	0.11

### No. of Notified Cases of Tuberculosis on Clinic Register.

1st January, 1961 ... ..	1,067
31st December, 1961 ... ..	1,074
Transfers from other Areas ... ..	20
Lost sight of cases returned ... ..	2
New cases diagnosed during the year ... ..	50
Total visits by Health Visitors ... ..	1,662

### Prevention

No. of New Contacts examined during 1961 ... ..	290
No. of New Cases diagnosed during 1961 ... ..	50
Contact Rate ... ..	5.8
No. of new cases detected by contact examination ... ..	—
No. of cases detected by school contact examination ... ..	1
Home Nursing Service treated ... ..	40
B.C.G. Vaccinations ... ..	145

Tuberculosis notification in Wallasey shows a large decrease this year, only 50 new cases being found. The number of cases over 45 years of age is 26, which is almost half the total, and confirms the findings in last years report. This showed that 43 out of 78 cases were in this group. The main point of interest is that only eight cases were detected between the ages of 15 and 24. In 1954 the School Health Service started giving B.C.G. to children of 13+. These children are now in the 15—24 year age group. Of the eight above-mentioned cases, only one had been given B.C.G. and she, married young, with two very young children, has a husband with very active tuberculosis. These figures seem to show that B.C.G. Vaccination is of value. It

will be interesting to continue viewing this problem in future years. Of course, one swallow does not make a summer and Public Health and Chest Clinic Services must continue their friendly efforts as before. Medical Research Council Reports on B.C.G. show that the children given B.C.G. have less chance of developing Tuberculosis than children who have acquired natural immunity by contact with the disease and thus acquiring a positive Mantoux Test.

The number of contacts examined per case this year was 5.8. 64 children found to be Mantoux positive at school were seen at the Clinic, and 163 of their contacts attended. Unfortunately 18 other Mantoux positive school children would not attend. One case of Tuberculosis in a child aged 13 years was found and is being treated.

### Care

The Health Visitors have again done excellent work, having made 1,662 visits. This, considering the size and spread of residential Wallasey represents a great deal of work and travelling in all weathers. The Health Visitors also serve as Welfare Officers to the Tuberculosis After-Care Committee and help in various schemes to raise money for the Anne Glassey Workshop.

The Home Nursing Service have nursed 40 patients in their own homes, and these patients have expressed their great appreciation of the nurses' skill, kindness and consideration.

Families receiving clothes, etc. ....	30
Housing defects reported by Health Visitors ...	12
No. of patients receiving milk ...	10
No. of cases rehoused ...	7
Referred to the Education Dept. ...	2
Home Helps ...	1
Children Mantoux positive at School ...	82
No. of contacts attending through above ...	163
No. of Mantoux positive children at School who attended Clinic ...	64
Free school meals ...	7

### Vaccination of Schoolchildren with B.C.G.

Vaccination against tuberculosis has been offered to schoolchildren of 13 years and over since 1954. The table which follows shows that until this year there has been a steady increase in the number of children vaccinated and a progressive fall in the number showing a positive reaction to the Mantoux test. This is a healthy sign as the incidence of Mantoux positive children is a measure of the prevalence of tuberculosis in the community. All Mantoux positive children and their family contacts are referred to the Chest Clinic for further investigation to exclude or confirm the presence of tuberculosis among members of the family.

During the year a child at one of the secondary schools developed pulmonary tuberculosis. The diagnosis was made during the summer



holidays. This child would have been eligible to receive B.C.G. vaccination at school, if she had returned to school after the holidays. Arrangements were, therefore, made for all her age group to be Mantoux tested shortly after the reopening of the schools in September. As a result, eighteen children were found to be Mantoux positive. All were referred to the Chest Clinic for X-ray. Sixteen were found to have old healed tuberculosis lesions and two had new lesions. The latter cases were put on active treatment. Investigation of the family contacts of these children did not reveal any sources of infection.

In addition, teaching staff of the school were x-rayed. No new cases of tuberculous infection were brought to light.

#### B.C.G. Vaccination—School Children:

No. of children—	1955	1956	1957	1958	1959	1960	1961
offered B.C.G. vaccination	1,085	1,315	1,398	1,545	1,783	1,673	1,651
accepting B.C.G. vaccination	851	927	1,030	1,121	1,215	1,273	1,212
Mantoux tested ... ..	821	917	1,013	1,084	1,168	1,232	1,110
found Mantoux positive ...	154	140	148	106	100	90	80
Percentage of children—							
Mantoux positive ... ..	18.8%	15.3%	14.6%	9.8%	8.5%	7.3%	7.2%
No. of children—							
found Mantoux negative ...	666	775	869	958	1,064	1,142	1,030
vaccinated with B.C.G.							
vaccine ... ..	660	769	861	946	1,061	1,136	1,029
Re-Tests after 1 year							
No. of children—							
Mantoux re-tested ... ..	269	583	668	1,112	697	53	64
found negative ... ..	7	20	26	13	6	4	6
No. of children—							
re-vacc. with B.C.G. vacc.	—	—	15	5	4	4	6

#### Provision of Nursing Equipment

There has continued to be a heavy demand for articles of equipment on loan. A small charge is made varying from 6d. per week for the smaller articles such as back rests and bed-pans, to 3/6d. per week for Dunlopillo mattresses. In cases of hardship no charge is made.

A stock of equipment is stored at a central depot, with the exception of a small number of articles which are kept at the Nursing Centre, 86a Penkett Road, Wallasey, for emergency use.

In 1961 a total of 878 articles were issued on loan as follows:—

Air-rings ... ..	86	Mackintosh sheets ...	183
Back rests ... ..	116	Self-lifting pole ...	3
Bed pans ... ..	189	Tripod Sticks ... ..	9
Bed Tables ... ..	3	Male Urinals ... ..	26
Bed with Lifting Pole	1	Female Urinals ... ..	4
Commodes ... ..	101	Wooden Bed Blocks ...	38
Crutches ... ..	6	Oxford Hoist ... ..	3
Dunlopillo Mattress ...	3	Oesophagus Box ... ..	3
Invalid Chairs ... ..	76	Special Bedstead ... ..	0
Knee cages ... ..	22	Enuresis Machine ...	6



## Clean Linen Service for the Incontinent Chronic Sick

This service has been in operation since September, 1959. Nine sheets are initially left at each home and the soiled sheets are replaced with clean on alternate days.

The following are details of the service during 1961 :—

No. of sheets issued during the year ... ..	9,792
No. of cases to whom sheets issued ... ..	49
No. of cases carried forward to 1961 ... ..	18

The scheme is working satisfactorily and is much appreciated by patients and the relatives of those being nursed at home.

## Health Education

A full account of the arrangements for health education was given in last year's Report. The Minister of Health has asked for details which are summarised as follows :—

(a) Health Visiting. Health Education in this borough is conducted primarily by the Superintendent Health Visitor and her staff. Mothers who attend the Child Welfare Clinics receive help and advice on all health matters, either through group teaching or to individual mothers, but the most valuable approach to health education is good home visiting. It is in the home that the health visitor is afforded a unique opportunity of advising on all health matters.

(b) Publications. A Health and Welfare Services Handbook, giving full details of the health authority's activities, and illustrated with photographs, is distributed free, the cost of publication being borne by income from advertisements.

Copies of "Better Health", the official journal of the Central Council for Health Education are purchased each month and are distributed free from the Health Department to various clinics, the Education Department and the offices of the Wallasey Executive Council.

(c) Posters. Full use was made during the year of the poster boards situated in Liscard Road, Wallasey, one of the busiest shopping areas of the borough, and also at the entrance to the Health Clinic, Oakenholt Road, Moreton. Topics included dental hygiene, vaccination and immunisation, accidents in the home, etc. Full use was made of the Ministry of Health posters on various topics.

(d) Leaflets and pamphlets. These were purchased, primarily from the Central Council for Health Education and were distributed from the various clinics, etc.

(e) General Practitioners' Clinics. One health visitor attended a weekly ante-natal and child welfare clinic arranged by a general practitioner and gave advice to mothers on all health matters.

(f) Mothers' Club. Full details of this Club, which meets fortnightly, are given on page 37. Talks are given on a variety of subjects.

(g) Midwives Clinics. These clinics are well attended and staff take every opportunity of advising mothers on matters of health education.

(h) Exhibitions. Small exhibitions were arranged at the various clinics, whilst in the autumn, during National Fire Prevention Week, an exhibition "Hazards in the Home, especially for the Very Young and Elderly" was arranged in conjunction with the Chief Fire Officer. Much propaganda has been disseminated in connection with "Clean Air" and arrangements were made for a mobile exhibition, illustrating the use of smokeless fuels to visit the borough.

(j) Lectures have been given in schools by the Principal Dental Officer on "Dental Care." The Deputy Chief Public Health Inspector addressed members of the School Meals Service regarding food hygiene.

(k) Merseyside Cancer Education Committee. This authority is taking part in the activities of this Committee. A full time officer is to be appointed, this authority paying  $\frac{1}{2}$ d. per head of population in support of this aspect of health education.

## Venereal Disease

The following table shows the number of Wallasey patients receiving treatment for the first time at various centres during 1961:—

	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other conditions</i>	<i>Total</i>
Mill Lane Hospital, Wallasey	2	3	22	27
St. James Hospital, Birkenhead ... ..	5	17	66	88
Royal Infirmary, Liverpool	—	5	10	15
Mill Road Clinic, Liverpool	—	1	3	4
Seamen's Dispensary and V.D. Clinic, Liverpool ...	—	8	54	62
	7	34	155	196

The total number of cases treated in 1961 shows a decrease of 14 compared with the previous year.

Plastic notices are fixed in all the conveniences in the borough and on the ferry boats giving details of the centres where, in the strictest confidence, treatment can be obtained. The advisability of obtaining early treatment cannot be over emphasised.

## Chiropody Service

The chiropody service, administered by the local health authority, commenced on 9th May, 1960. Since that date the number of patients receiving treatment has steadily increased but it is anticipated that the numbers, having reached the optimum, will in future remain fairly static.



The scheme is much appreciated, particularly by the elderly in the community and patients can visit an approved chiropodist of his/her choice near their own home.

Applicants for treatment must, in the first instance, obtain a certificate from their family doctor. An authorisation card is then issued from this department to the applicant to be presented to the approved chiropodist of his/her choice. There is no charge for treatment to persons in receipt of National Assistance, or whose sole income is the statutory old age pension. The charge for other beneficiaries is in accordance with the scale approved by the Council.

Fees payable to the chiropodist are 6/- for each surgery treatment and 8/6d. for domiciliary treatment. It was agreed that in those cases where the full fee is payable by the patient, that such payments should be outside the scheme administered by the local authority.

As at 31st December, 1961, there were seven chiropodists participating in the scheme, all of whom satisfy the conditions laid down in the National Health Service (Medical Auxiliaries) Regulations, 1954. It has been decided not to operate sessions in the local authority clinics, but that treatment should be given in the chiropodist's own surgeries or at the patient's home if necessary.

The following are details of treatment given during 1961:—

(a) Number of patients registered	...	...	...	...	1,093
(b) Number of treatments given:—					
(i) Old Age Pensioners	...	...	...	...	6,581
(ii) Physically Handicapped	...	...	...	...	93
(iii) Expectant Mothers	...	...	...	...	Nil
					<hr/> 6,674 <hr/>

## SECTION 29 — DOMESTIC HELP SERVICE

Mrs. Malcolm Falla, Organiser, reports as follows:—

“Wallasey has a large ageing population and more and more elderly people are needing the services of a home help, not only during the time of sickness but afterwards when they are unable to cope with all their domestic chores. Many cases would have to go into hospital or hostel if they did not have a helper attending, thus the service helps to relieve the demand on hospital beds. It is my firm conviction that old people are happier in their own homes and they have a peace of mind, knowing that if they should be taken ill there is someone going in to care for them. Most of our old people admit that they look forward to the days the helper goes in. There are many more mothers having help during home confinement and these are cases which have full-time help.

Looking back over the last 16 years I think it can truthfully be said that Wallasey Home Help Service is making an invaluable contribution to the health and happiness of the community.”



## Statistics for 1961

	<i>Mat.</i>	<i>T.B.</i>	<i>O.A.P.</i>	<i>Others</i>	<i>Total</i>
Applications received	76	2	369	76	523
Applications cancelled	4	—	13	6	23
No. of cases ... ..	72	2	356	70	500
No. of hours worked	4,707¾	934	70,811¾	5,160¾	81,614¼
No. of helpers on 31.12.61 ...	Part-time 34 ) Full-time 29 ) equivalent 46 helpers				

## SECTIONS 28 and 51 — MENTAL HEALTH SERVICE

### Introduction

Under Part III of the National Health Service Act, 1946, the Local Authority is responsible for the ascertainment of mental disorder, for arranging the admission of patients to psychiatric hospitals, and for work in the field of prevention, care, and after-care in the community. Part II of the Mental Health Act, 1959, which became fully operative on the 1st November, 1960, adds to these duties functions relating to the provision of training centres, the provision of residential accommodation and increases the emphasis in the care of the mentally disordered in the community.

### Administration

The Medical Officer of Health is the administrative officer and he, together with the other three Medical Officers of the Local Health Authority, is approved under the provisions of Section 28 of the Mental Health Act, 1959, as having special experience in the diagnosis or treatment of mental disorder.

Five Mental Welfare Officers were fully employed during the year, in carrying out the statutory duties of the Local Health Authority, one of whom was re-graded as from the 28th July, 1961, to the post of Senior Mental Welfare Officer.

One quarter of the time of four of the Welfare Officers is allocated to the Welfare Committee.

During the year one officer attended an induction course for newly appointed officers at Harrogate, of two weeks duration.

### General Observations

1961 appears to have been a year of consolidation in the working of the new Mental Health Act.

The new provisions have not been operated without some initial difficulties, but problems have been discussed with other interested bodies and where a spirit of friendly co-operation has existed, the problems have been solved with amicable agreement.

It has, however, been a year of change, which has called for adaptability on the part of all sections of the National Health Service.

The existing friendly relationship with the general practitioners in Wallasey has eased into existence the need to sign medical recommendations for observation and treatment. I should like to thank the Approved Practitioners for their help so willingly given at all hours of the day and night—the new requirements that two medical recommendations are needed for compulsory admission have operated smoothly, and, there has of course, been a vast increase in the number of domiciliary visits paid to patients in their own homes by Consultant Psychiatrists. The patients and their relatives have generally appreciated the extra medical attention they have received, and there has been an even closer liaison between all parts of the National Health Service for the benefit of patients.

The fortnightly case conferences between Dr. James (Consultant Psychiatrist) the Medical Officer of Health and the Mental Welfare Officers have continued throughout the year and have proved most valuable, as have the Case Conferences held at the Deva Hospital every two months.

Talks and discussions on Mental Health subjects were given during the year by the Senior Mental Welfare Officer to the Rotary Club, the Disablement Advisory Committee, the Standing Conference of Women's Organisations, and various other voluntary organisations. Further requests for a speaker continue to be received and show the awakening public interest in Mental Health Problems.

Domiciliary Visits by Mental Welfare Officers during 1961 were :—

Mental Illness	...	...	...	...	...	3,105
Psychopaths	...	...	...	...	...	46
Sub-normal	...	...	...	...	...	827
						<hr/>
Total						3,978
						<hr/>

This is an increase of 1,174 visits over last year due largely to the 644 visits of the additional welfare officer, but there has been an increase in visiting by all the Welfare Officers mainly in the field of after-care.

## Mental Health Act, 1959

### Section 29 (Admission for emergency observation)

	Male	Female	Total
St. Catherine's Hospital Annexe ... ..	46	42	88
Deva Hospital ... ..	6	14	20
Moston Hospital ... ..	1	—	1
Sefton Hospital ... ..	—	1	1
			<hr/>
			53
			<hr/>
			57
			<hr/>
			110
			<hr/>

**Section 25 (Admission for observation)**

St. Catherine's Hospital Annexe ... ..	5	13	18
Deva Hospital ... ..	6	20	26
Moston Hospital ... ..	—	1	1
The Retreat, York ... ..	—	1	1
Cheadle Royal Hospital ... ..	1	1	2
	<hr/> 12	<hr/> 36	<hr/> 48

**Section 26 (Admission for Treatment)**

St. Catherine's Hospital Annexe ... ..	1	2	3
Deva Hospital ... ..	6	10	16
Moston Hospital ... ..	—	1	1
	<hr/> 7	<hr/> 13	<hr/> 20

**Section 60 (Admission from Courts)**

St. Catherine's Hospital Annexe ... ..	—	1	1
	<hr/>	<hr/>	<hr/>

**Informal Admission**

St. Catherine's Hospital Annexe ... ..	33	74	107
Deva Hospital ... ..	27	35	62
Moston Hospital ... ..	10	13	23
Liverpool Hospital, Kingswood ...	1	6	7
Cheadle Royal Hospital ... ..	1	—	1
Haydock Lodge, Haydock ... ..	—	1	1
Westminster House (Senile Dementia Ward) ... ..	11	—	11
	<hr/> 83	<hr/> 129	<hr/> 212





## SUB-NORMAL AND SEVERELY SUB-NORMAL

Total number of sub-normal and severely sub-normal persons on the Local Authority Register (excluding children being dealt with by the Education Authority) on 31st December, 1961:—

(a) In Institutions	...	...	...	...	...	135
(b) Under Supervision in the Community	...					133
Discharged, from hospital	5			Admitted to hospital	...	11
New Cases	...	...	...	Left District	...	6
				Married	...	1

### (a) Institutions

As envisaged in the Mental Health Act, 1959, the policy of discharging Orders and, allowing patients to remain in hospital on an informal basis has continued and now very few patients are compulsorily detained.

During the year four patients (two male and two female) have been discharged from hospital to their homes and another female was placed, in residential employment before finally being discharged.

Conversely 11 patients (six males and five females) have been admitted informally for hospital care and training but two of these, both boys, were already in temporary institutional care. Many of the patients admitted for training return to their homes at frequent intervals for periods varying from one or two weeks to two or even three months and this enables other patients to be admitted, for "short term" or "temporary" care in cases of domestic crisis or to give the relatives a break.

### (b) Community Care — Short-term Care

During the past year 19 patients (nine boys and 10 girls) have been admitted to short term care—two in a local Children's Hospital and two in a Private Home, the others in State Hospitals. The charges of the private Home were paid in full by one parent and shared by the Local Authority in the case of the other, both being emergency admissions where the Mother was admitted to hospital for operation.

The periods of temporary care have varied from 2—4 weeks with extensions in some cases where home circumstances have made this necessary or when the patient has been on trial pending a permanent admission. This latter procedure has been greatly extended during the year and the additional accommodation provided by new buildings at existing hospitals has enabled the Waiting List to be almost exhausted, although three recent applications have offset this improvement in the situation. In spite of this, at 31st December there were only nine patients awaiting admission to hospital (eight males and one female) and of these, three only are really urgent cases.

### Training

A further major step forward in this field is the extension of training facilities available.

As previously children aged approximately 5—16 years receive training appropriate to their needs and abilities at the Junior Training Centre in Hale Road, and the demand for admission is steadily increas-



ing — children of from two years upwards frequently having to be refused admission as too young. There is now seldom any need to enforce attendance but the power to do so can be of vital importance to a child's welfare. Parental resistance is however quite often encountered when it becomes advisable in a child's best interests to transfer him/her from Claremount or Elleray Park Special Schools to Hale Road. Once established at Hale Road however, the resistance generally disappears. It is vitally important for a child to be able to succeed at least sometimes.

Children over 16 years *continue* attending Hale Road pending the provision of an Adult Training Centre. Those over 16 years who are unable to obtain or hold employment and, who in many cases attended Claremount Special School for the Educationally Sub-normal or Private Schools, are now able to attend a special class at Penkett Road or Moreton. The former has been running for approximately six months and in November was divided into two classes, one for boys and, one for girls. During the year a total of 27 sub-normal males and females (as against last year's nine) have attended these classes, but a few have left when they obtained employment whilst others have been admitted to hospital. The tuition given in these classes is far outweighed by the incidental advantages which accrue such as re-socialisation, the ability to travel alone, the development of individual personality and independence and a gradual understanding of some of the more commonplace needs in modern life.

The training given at present is mainly handicraft, with incidental help in counting, money calculations, tea-making, washing and brushing up, etc., but the class is gradually expanding in scope to cover sewing and simple dress making. Its boundaries are set solely by limitations in time, personnel and funds; ideas and enthusiasm are abundant. It is felt that the class will be accustomed to working together and anxious to tackle whatever may be presented to them in the Adult Training Centre or Sheltered Workshop as soon as it can be provided.

In addition, to these two main forms of training, six children attend Spastic Units for treatment and training in Wallasey and Birkenhead whilst three older patients enjoy the facilities provided at the special classes for Spastics at Penkett Road.

### **Domiciliary Visiting**

As patients are gradually introduced to a more regular and systematic training, the need for "routine" home visiting becomes less essential and time can therefore be directed to deeper and more skilled casework with the families requiring greater help, time and care.

Somewhat protracted visits are also always paid to any new cases in an endeavour to reassure the parents and to advise them regarding present training and attitudes, future prospects, and the help and facilities available to them and above all, to try and help them to accept the situation as it is and, plan realistically and constructively for the future.

In addition visits are made on behalf of hospitals and the Regional Hospital Boards to obtain any specific information required and complete home circumstance and progress reports and for the completion of Case Papers, etc. During the past year 827 visits and interviews have been made.



## Recreation

The regular Wednesday evening social club run by the Wallasey Society for Mentally Handicapped children continues to provide a much needed social outlet for some of the younger-in-mind and parents are often advised of its existence. A similar Club is badly needed by some of the maturer patients who are irresistibly drawn to the convivial atmosphere of public houses in their quest for social warmth and comradeship.

1961 has indeed seen many advances in the sphere of the Mentally Sub-normal but this is only a beginning and there is still much to be done towards absorbing these unfortunate people in the community as happy and useful individuals.

## Junior Training Centre

The Centre situated at 4, Hale Road, Wallasey, has accommodation for approximately 90 children, and by arrangement with the County Borough of Birkenhead severely sub-normal children from that authority attend the centre.

The ages of the children vary from five to 16 years and, in addition there are several over 16 years of age who attend a special class pending the provision of an adult Training Centre.

In order that as much individual attention as possible can be given to each child the classes are sub-divided into groups of approximately 12 children. The number of children on the register at the end of the year was 42 from Wallasey and 42 from Birkenhead. It has not been necessary to resort to the use of powers under the Mental Health Act regarding compulsory attendance since the passing of the Act.

During the year further improvements were made to the building including the installation of smokeless fuel appliances.

The Staff were authorised to attend a refresher course at Manchester, the syllabus including lectures and discussions.

The Centre is open for five days per week—Monday to Friday—from 9.0 a.m. to 4.0 p.m. It is closed for one month in the summer and approximately four weeks during the remainder of the year.

Children are conveyed to and from the Centre by special buses. A mid-day meal is provided. Regular monthly visits of inspection are made by the Deputy Medical Officer of Health and the children examined, whilst the Principal Dental Officer makes arrangements for any necessary dental treatment.

Handicrafts include basket and rug making, mop making, leatherwork, embroidery, simple sewing, papier mache work, cardboard modelling, etc. Physical training is carried out as part of the Centre's curriculum. Instruction is given in personal hygiene and habit training.

Experience has shown that even the most difficult children benefit from attendance at the Centre.

The Annual Outing, which was again to Southport was much enjoyed and a colour film of the annual sports day was taken. This has been shewn to meetings of parents and friends who have always shewn a keen interest. The Christmas party was again successful.

During the year gifts of toys and equipment and also of cash have been made by friends and these are much appreciated.



## PART IV.

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*General Health Services, etc.*



## FOOD AND DRUGS

A total of 403 samples of foods were taken from retail, wholesale and manufacturing premises.

Milk samples taken from retail supplies were all genuine, with an average analysis of 3.57% of fat and 8.61% of non fatty solids for ordinary milk, and 4.81% of fat and 9.26% of non fatty solids for Channel Island Milk.

One sample of milk was found to be slightly deficient of non fatty solids but this was a natural deficiency.

One sample of sugared confectionery was incorrectly labelled as "Chocolate," the fat consisted of a hardened vegetable fat whereas fat in genuine chocolate should consist of cocoa fat. The label was withdrawn by the seller.

One sample of Instant Coffee was not correctly labelled. The attention of the seller was drawn to the incorrect wording.

## FERTILISERS AND FEEDING STUFFS ACT

Samples of fertilisers and animal feeding stuffs are taken to ensure that they comply with statutory requirements and guaranteed analysis. Of 20 samples taken 4 samples were outside the permitted limits of variation. The errors were not such as to warrant proceedings, and the makers were cautioned.

## PHARMACY AND POISONS ACT

During the year the following applications were made:—

For registration	... ..	6
For re-registration	... ..	140

## CONTROL AND SUPERVISION OF MILK SUPPLIES

The safety of a milk supply can in the end be ascertained only by laboratory testing, and samples from each source of supply are constantly obtained and submitted to the laboratories for this purpose.

Each sample of processed milk is subjected to two statutory tests, i.e. (1) the Phosphatase test, which basically determines whether the milk has been treated in accordance with the processing techniques laid down for pasteurised supplies, and (2) the Methylene Blue reduction test, which provides a means of assessing keeping quality. With the eradication of Bovine Tuberculosis, the possibility of a milk supply being contaminated with tuberculosis infection no longer remains a cause for concern, but it does remain a matter of importance for maximum safeguards to be continued owing to the possible danger presented by other pathogenic organisms which may be present in the supply. Re-infection in a herd which has been certified free from tuberculosis whilst rare is not unknown, and it is in the coverage of contingencies of this nature that the commercial pasteurisation and sterilisation of milk continues to play an important role in protecting the consumer. In consequence, the efficiency of the day to day methods of heat treatment, as applied to milk must remain a matter of primary concern from a Public Health point of view. A negative Phosphatase report is the "yardstick" or measurement of the safety of the supply, and it is gratifying to record almost complete conformity to the prescribed statutory tests of all samples submitted, thereby indicating a constant level of safety.

The following is a summary of sampling carried out by the department during the year.—

### **Pasteurised Milk**

No. of samples obtained 98.

of which 90 satisfied both the Methylene  
Blue and Phosphatase Tests.  
5 failed the Methylene Blue Test.  
3 Test void.

—  
98  
—

### **Tuberculin Tested Milk — Pasteurised**

No. of samples obtained 65.

of which 58 satisfied both the Methylene  
Blue and Phosphatase Tests.  
7 failed the Methylene Blue Test.  
— Test void.

—  
65  
—

### **Tuberculin Tested Milk — Pasteurised (cartoned supplies)**

No. of samples obtained from  
Milk Vending Machines 23.

of which 16 satisfied both the Methylene  
Blue and Phosphatase Tests.  
7 failed the Methylene Blue Test.  
— Test void.

—  
23  
—

*Note:* “Test Void” is declared automatically if the overnight atmospheric temperature in the vicinity of the sample exceeds 65° Fahr. “Test Void” is no reflection on the keeping qualities of the sample.

I am indebted to the Director and Staff of the Public Health Laboratories, Liverpool, for their help and co-operation in the testing and reporting on milk samples submitted by my department.

### **Sterilised Milk**

Bottled supplies of milk of this designation form a substantial part of the total turnover of many of the smaller retailing shops. One of the great advantages in handling supplies of sterilised milk is the ease and simplicity under which it may be kept, refrigerated storage being unnecessary even in the warmest weather. Sterilised milk is subjected to a process of homogenisation, thereby imparting a rich and creamy consistency and, whilst its popularity and demand varies from district to district, more purchasers are becoming aware of its attributes and qualities. 16 samples of sterilised milk were obtained and submitted to the Turbidity Test, which is the statutory



test for determining wholesomeness. The laboratory reports received indicated that in all cases the samples were satisfactory. Sterilised milk, as the designation implies, is a sterile and safe milk.

### **Tuberculin Tested Milk — Pasteurised**

Milk of this designation is available throughout the Borough, bottled supplies being purveyed by most distributors.  $\frac{1}{2}$  pint cartoned supplies are dispensed from the various Milk Vending Machines, from which samples have from time to time been obtained.

No consumer complaints were received during the year concerning milk purchased from Milk Vending Machines, of which there are four in service in the Borough, thus indicating that satisfactory arrangements prevailed in the maintaining and replenishment of supplies by the distributors concerned.

### **Raw Milk**

Farm bottled and cartoned milk, the latter being available only from a Milk Vending Machine, comprise the only supplies of raw "Tuberculin Tested" and "Channel Island" milk available within the Borough. "Channel Island", "Jersey", "Guernsey" and "South Devon" are authorised designations which may be applied. Supplies so described, and which are available through most distributors, must contain not less than 4% by weight of milk fat.

Seven samples of this category of milk were obtained, of which five satisfied the statutory Methylene Blue Test.

The samples of milk taken by the Department were obtained from the following sources:—

Dairies	...	...	...	...	...	...	...	...	...	62
Schools	...	...	...	...	...	...	...	...	...	51
Shop Premises	...	...	...	...	...	...	...	...	...	30
Delivery Vehicles	...	...	...	...	...	...	...	...	...	20
Milk Vending Machines	...	...	...	...	...	...	...	...	...	23
Total number of samples submitted for Laboratory Testing										186

Seventeen complaints were received relating to milk supplies involving the following matters:—

Alleged use of unclean receptacles (bottles)	...	...	...	10
Alleged contaminated supply	...	...	...	2
Alleged presence of glass fragments	...	...	...	2
Alleged presence of living insects	...	...	...	1
Alleged dumping of used bottles	...	...	...	1
Alleged excessive water (complaint withdrawn)	...	...	...	1

In certain instances, the circumstances were reported, to the General Health Committee. No prosecutions were authorised, but warning letters were forwarded. In other cases, dairy managements were interviewed and relevant communications forwarded.



## **The Milk (Special Designation) Regulations, 1960**

## **The Milk and Dairies (General) Regulations, 1960**

The pasteurisation of milk under licence is carried out at three dairies in the Borough. The plants comprise a modern high temperature short time appliance and two "Holder" type plants. The sampling of milk from each source of supply for testing has indicated that the apparatus and processing methods are being efficiently maintained.

At one of the dairies at which pasteurisation was applied by means of the "Holder" method, the processing of milk was discontinued during the year.

The mechanical application of steam, hot water, detergents and sterilants is the method used in maintaining the cleanliness and sterility of all milk apparatus and equipment, including churns and bottles.

There were 118 registered milk distributors licensed to retail bottled supplies of designated milk at 1st January, 1961. In addition, nine new distributors were registered and nine licences were granted during the year.

## **Milk Vessels**

During the year a number of the larger dairy undertakings engaged in milk processing and in wholesale and retail distribution in the North Wirral area, which includes the County Borough of Wallasey, combined with Health Committees, health officials and the press in a campaign to effect some improvement in the very unsatisfactory position which had developed in connection with milk bottles. Losses to the industry were estimated to have risen to the region of 2½ million bottles annually, and, it was a matter of daily concern and necessity at the dairies to withdraw from circulation many bottles on account of the deplorable state in which they were returned. It is quite impossible to carry out the effective cleansing of milk bottles which have been unlawfully used for containing noxious liquids and other substances; such bottles have to be constantly searched for by the dairy staffs and, when found, destroyed in order to safeguard against their further use. It is a problem which places a difficult and heavy responsibility on dairy managements, but, despite the exacting nature of the work involved at the dairies in combating this menace, the number of bottles which are missed is infinitesimal when compared with the magnitude of the task which detecting and sorting entails. The problem is one which could be remedied overnight by genuine effort on the part of the minority of the public, estimated to be approximately 5%, who are mainly responsible for this very unsatisfactory position. If they would only heed and react to the simple maxim "Rinse and return all milk bottles daily." The organisers and health officials associated with the North Wirral Clean Milk Bottle Campaign aim at no more than to bring this brief but important message to the attention of all who are offenders, and, in turn, to gain their active interest and support in improving this very unsatisfactory state of affairs. The assistance given in publicity by the various Undertakings and Departments of the Wallasey Corporation has been greatly appreciated by the campaign organisers, who are especially grateful to His Worship, the late Alderman J. Stanley K. Morris, J.P., and to the Chairman and Members of the General Health Committee for their active participation.

### Milk in Schools Scheme

During the year, 2,588,053 one-third pint bottles of milk (107,836 gallons) were supplied under the Milk in Schools Scheme, a decrease of 32,893 one-third pint bottles of milk (1,370 gallons) compared with the quantity supplied during the previous year.

Six suppliers are responsible for deliveries to the schools under contract, and supplies generally were satisfactorily maintained.

### MEAT AND FOOD INSPECTION

Visits made to food shops, including butchers, fishmongers, etc., and other premises engaged in the sale and handling or preparation of foodstuffs resulted in the following quantities of food being disposed of as unfit for human consumption:—

#### Meat

Imported Beef	...	...	...	...	...	...	...	...	78 lbs.
Home Killed Beef	...	...	...	...	...	...	...	...	87 lbs.
Fresh Beef (Ships Stores)	...	...	...	...	...	...	...	...	120 lbs.
Fresh Mutton (Ships Stores)	...	...	...	...	...	...	...	(8 carcasses)	320 lbs.
Bacon	...	...	...	...	...	...	...	...	200 lbs.

#### Canned Goods

Fruit	...	...	...	...	...	...	...	...	...	162 cans
Milk	...	...	...	...	...	...	...	...	...	64 cans
Preserves	...	...	...	...	...	...	...	...	...	7 cans
Fish	...	...	...	...	...	...	...	...	...	27 cans

#### Poultry

- 1 Fresh Chicken Carcase (uncooked)
- 12 Frozen Chicken Carcases (uncooked)

#### Miscellaneous

Various Canned Foodstuffs	...	...	...	...	...	...	...	1,225 cans
Sliced Cooked Meat—various	...	...	...	...	...	...	...	35½ lbs.
Frozen Foods	...	...	...	...	...	...	...	665 packets
New Potatoes	...	...	...	...	...	...	...	38 lbs.
Dried Apricots	...	...	...	...	...	...	...	2,065 lbs.
Coconut-covered Mallows (cartoned, supplies)	...	...	...	...	...	...	...	460½ lbs.
Coconut-covered Mallows (loose packages)	...	...	...	...	...	...	...	1,239 packets

In addition during the year, 235 containers comprising corned beef, corned mutton, chopped pork, cooked gammon, cooked shoulder, pork luncheon meat, lunch tongue, jellied veal and pork representing a total weight of 1,265 lbs., were dealt with by voluntary surrender at food premises as being unfit for the purpose of sale for human consumption.

One of the principal causes of unwholesomeness in canned hams is the inability of those who handle them to realise or appreciate the importance of compliance with the Canner's instructions, i.e. "Perishable must be stored under refrigeration." This instruction invariably applies when the particular cooking or canning technique employed has not rendered the finished product completely sterile, and following the



processing of such products, continuous storage (i.e. until required for use) at low temperature is essential if wholesomeness is to be maintained. Disregard of the Canner's instructions inevitably gives rise to a condition of progressive putrefaction, with the result that, on opening the containers, the hams are found to be entirely unfit for human consumption. Strict observance of the Canner's instructions would result in the elimination of this unnecessary wastage.

Fifty-two consumer complaints were received involving a wide range of food stuffs including meat, offal, mineral waters and beverages etc. The complaints originated from a variety of reasons, viz: alleged unwholesomeness, alleged presence of foreign bodies or extraneous matter and/or alleged contamination, the latter usually involving beverages or mineral waters, the cause of the contamination being invariably associated with the misuse of returnable bottles for the containing of unauthorised liquids. The Soft Drink Manufacturers are alive to this particular problem and, through their Association, issue what they refer to as a "Giant Letter." In this, among other things, they point out to the public in a realistic manner, the risks and dangers involved through the unlawful use of Soft Drinks bottles for containing undrinkable and dangerous liquids. The danger is dramatically emphasised by a reference to a case in Scotland when a labourer died after accidentally drinking cleaning fluid from a lemonade bottle. The department does from time to time assist with this form of publicity.

Each complaint was investigated, and, where justified, the circumstances were reported to the General Health Committee. No legal proceedings were instituted. Warning letters were authorised and forwarded, in two instances. In a number of cases, correspondence and interviews took place with Companies and Managements. In other complaints, there was insufficient, or complete lack of, evidence and it was not possible to proceed with the enquiries.

The dried apricots referred to were rendered unfit for human consumption owing to deterioration subsequent to damage by water, and formed part of a salvaged consignment.

The consignment of coconut-coated mallows gave rise to some concern owing to adverse laboratory reports which had indicated that the coconut used in the manufacture of this product was contaminated with pathogenic organisms of faecal origin, attributed to unsatisfactory and unhygienic methods of handling and preparation in the exporting country. This position had been revealed by the sampling of certain categories of coconut on importation by the Port Authorities. In consequence, the mallows held at premises in this Borough, and which were intended for the purpose of retail sale, were surrendered by the owners to this department and destroyed.

As a result of a consumer complaint, the wholesomeness of a consignment of canned corned beef at a local store was found to be in doubt. The whole of the stock was withdrawn from sale and the matter taken up with the Retail Company concerned. The Company produced a certified copy of a report furnished by a firm of analytical chemists confirming the quality and wholesomeness of samples of this meat product, and the Company had relied on this report. All stocks of this particular brand of corned beef were recalled. No further action was taken by this department.



Visits were made on request in connection with food supplies to the following premises:—

Theatres	... ..	4
Hospitals	... ..	4
Kitchens (School Meals Service)	... ..	5
Hotels	... ..	12
Wholesale Food Distributors	... ..	17
Retail	„ „ ... ..	132

Certain employees engaged in food distribution in the Borough were verbally cautioned, and their employers communicated with, concerning the non-observance of provisions contained in the Food Hygiene Regulations relating to the protection of food trays and food containers from contamination.

A caution and, similar letter were also directed to the Proprietor of a Provision Store.

All foodstuffs found to be unfit for sale for human consumption and subject to certification by the Food Inspector were collected and disposed of by the department.

The meat referred to as “ex Ships Stores” was rendered unfit due to a refrigerator breakdown on board.

The bacon referred to was rendered inedible owing to decomposition and Blow Fly attack.

The items referred to under “Miscellaneous—Frozen Foods” were rendered unfit due to refrigerator faults at retail shop premises.

Various matters arising in the course of inspection were passed to the District Public Health Inspectors for attention.

### **The Animal Feeding Meat and the Meat Staining Regulations, 1959**

Enquiries were made in order to confirm that supplies of animal feeding meats on sale at various Pet Shops in the Borough were being obtained through legitimate channels and through wholesale suppliers who were duly authorised to receive and distribute this class of meat in accordance with the provisions contained in the Regulations.

The Regulations apply in England and Wales and require all butcher's meat and imported meat unfit for human consumption to be sterilised, and all knacker meat to be stained, or sterilised before entering the chain of distribution.

All Pet Shop Proprietors in the Borough are aware of the requirements of the Regulations.

### **WALLASEY AND ALFRED LAIRAGES**

#### **Landing Place for Irish and Isle of Man Animals and Foreign Animals Landing Wharf**

This year 95,714 store and fat cattle were accommodated and subsequently despatched by rail and road transport from the Lairage at this landing place. The figure shows an increase of 44,570 on the number of cattle handled the previous year.

Of the animals detained by the Veterinary Officers, 190 were slaughtered, this being 81 more than the number slaughtered in the previous year.

The use of this Port Slaughterhouse is confined exclusively to the slaughter of cattle in which, following disembarkation, evidence of illness or injury has been diagnosed by the Ministry's Veterinary Inspectors.

Post mortem examination of all carcasses, viscera and offal was carried out by this department, and the following is a tabulation of the diseased conditions met with and the condemnations made:—

Number killed ... ..	190
Number inspected ... ..	190

### **All diseases except Tuberculosis and Cysticerci**

Whole carcasses condemned ... ..	1
Carcasses of which some part or organ was condemned	128
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ... ..	67.9%

### **Tuberculosis only**

Whole carcasses condemned ... ..	Nil
Carcasses of which some part or organ was condemned	1
Percentage of the number inspected affected with tuberculosis ... ..	0.05%

### **Cysticercosis**

Carcasses of which some part or organ was condemned	Nil
Carcasses submitted to treatment by refrigeration ...	Nil
Generalised and totally condemned ... ..	Nil

### **Total weight of meat and offal condemned**

Meat ... ..	860 lbs.
Offal ... ..	1,985 lbs.

132 visits were made during the year to the slaughterhouse at this landing wharf.

### **Slaughterhouse Act, 1958**

The Minister of Agriculture, Fisheries and Food intimated during the year his approval and acceptance of the report on slaughtering facilities which this Council had submitted in compliance with the terms of the Acts.

The Wallasey Lairages, including the port slaughterhouse, form part of the Mersey Cattle Wharf Undertaking, which is owned and managed by the Mersey Docks and Harbour Board. During the year, the owners have proceeded with various constructional works rendered necessary under provisions contained in the Slaughterhouse Act and under Regulations governing food hygiene and the prevention of cruelty.



## **PUBLIC HEALTH (SHELLFISH) REGULATIONS**

### **Mussel and Cockle Beds — Wallasey Foreshore**

Shellfish, mainly cockles, are collected on an organised scale from the foreshore in the Moreton, Leasowe and Wallasey areas. This is an occupation which provides a means of livelihood to a number of inshore fishermen and cocklers, who reside outside the Borough. The bagged shellfish are conveyed into the area of a neighbouring Authority where they are subjected to an approved process of sterilisation prior to despatching for the purpose of sale. This procedure is provided for under provisions contained in an Order made by the Liverpool Port Health Authority under the Public Health (Shellfish) Regulation, 1934. The taking or gathering of shellfish by persons who fail to submit them to an approved method of treatment or sterilisation does, from time to time, however, give cause for concern, enforcement being particularly difficult, especially in obtaining proof that the shellfish are intended for the purpose of sale for human consumption. The collection of cockles by individuals for their own home consumption is also an activity which remains immune from official intervention. The Order does, however, ensure a sound degree of protection against the risk or possibility of disease being disseminated through the sale of contaminated shellfish, and affords a safeguard to purchasers who hold in such high regard and favour the edible qualities of this common mollusc.

The gathering of mussels in the area has, owing to their scarcity, virtually ceased.

No reports or information were received during the year involving illness suspected of being associated with the consumption of shellfish originating from this district.

## **DISEASES OF ANIMALS ACTS AND ORDERS**

### **Notifiable Scheduled Diseases of Animals**

During the year a circular letter received from the Minister of Agriculture, Fisheries and Food suggested the advisability of consideration being given to the rescinding of any compulsory Sheep Dipping Regulations which were in force. This was based on the Minister's contention that sheep scab in this country had virtually been stamped out and that, in consequence, the need for the compulsory seasonal dipping of sheep as a preventive means of control against scab was no longer necessary.

This Council, after due consideration, resolved that the local Sheep Dipping Regulations be revoked, and the Minister was accordingly advised.

Visits were made to piggeries in connection with the provisions contained in the Waste Foods Order, 1957. This requires the adequate cooking or heat treatment of all swill and its exclusion, after processing, from contact with any raw or unprocessed swill. The Order also provides for the adequate cleansing of swill receptacles. These measures aim at the prevention of the spread of foot and mouth disease, swine fever and other diseases of farm animals, including poultry.

Visits were, from time to time, made to ascertain that cattle, sheep and lambs grazing on lands situated in the Borough were receiving



the necessary care and attention from the owners or persons having charge or control. All sheep and lambs were during the season gathered and sprayed with an approved single type all-purpose dip, the water used being from a mains supply conveyed to the site, and necessitated by the polluted state of the water in the River Birket.

No evidence was observed in cattle necessitating any action under the Warble Fly Dressing of Cattle Order.

The usual observations were, from time to time, made on inward British and foreign vessels entering the Wallasey Docks system in order to ascertain if any animals, dogs, poultry, or hay and straw, were being carried with the intention of being landed, contrary to the provisions contained in the Regulations.

No deaths of farm animals were reported during the year, and no notifications of suspected cases of disease were received.

One enquiry was received, concerning sick and oiled seabirds.

The County Borough was included in a Foot and Mouth Disease Controlled Area, which was scheduled to prevent the spread of foot and mouth disease, and the movement of all farm animals became subject to licence restrictions.

Movement restrictions, made under the Swine Fever (Infected Areas) Order, 1953, were also introduced during the year and involved the County Borough. Movement Licences were issued, which authorised the removal of 101 fat pigs for immediate slaughter.

Under the Regulations of the Movement of Swine Order, 1959, 161 store pigs were brought into the Borough on licence from various markets.

Notices relating to Foot and Mouth Disease, Swine Fever, Fowl Pest, African Horse Sickness and Bovine Tuberculosis were publicised during the year.

The presence of suspected colorado beetles was reported on a number of occasions. In each instance, the suspected insect was identified as a species of the common burying beetle, and no action was necessary. The greatest vigilance is, nevertheless, called for in keeping this winged pest at bay, for its undetected presence can constitute a grave threat to growing crops in the potato growing districts.

### **THE CHILDREN ACT, 1948**

Children are medically examined as soon as possible, after admission to the Children's Homes, and also before discharge, and the medical staff of the Public Health Department give advice whenever necessary.

### **THEATRICAL EMPLOYERS' REGISTRATION ACT, 1925**

No applications for registration were received during the year.

### **DOMESTIC SERVANTS' REGISTRIES**

There were no applications for registration as Domestic Servants' Registries during the year.



## PART V.

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*Report of the Chief Public Health Inspector  
on the  
Environmental Health and Hygiene  
of the area*



## **REPORT OF CHIEF PUBLIC HEALTH INSPECTOR ON THE ENVIRONMENTAL HEALTH AND HYGIENE OF THE AREA.**

### **Introduction**

I have pleasure in presenting my first Annual Report on the work of the public health inspectorate during the year 1961.

### **Slum Clearance**

The Council's second, five-year slum clearance programme was commenced during the year, and a proposed Compulsory Purchase Order was passed by the Council in October. The proposed Order includes The Wallasey (No. 107) Brighton St./Ellis St. Clearance Area, 1961, The Wallasey (No. 108) Brighton St. Clearance Area, 1961, and The Wallasey (No. 109) Beaconsfield Rd./Demesne St. Clearance Area, 1961. The three Areas contain 126 unfit houses out of a total of 567 houses included in the Council's current slum clearance programme. The proposed Order will be submitted to the Ministry of Housing and Local Government during the early part of 1962. Certificates of Unfitness were issued and approved by the Minister on 12 houses in the Wallasey Village area.

### **Clean Air**

The Wallasey (Leasowe) Smoke Control Order No. 6, 1960, was confirmed on the 17th May, 1961. This covers an area of 1,920 acres and includes 3,247 dwelling houses. This Order comes into operation on 1st September, 1962. The proposed Wallasey (No. 7) Smoke Control Area, comprising over 6,000 houses, is being submitted to the Ministry for approval in February, 1962. The initial survey of the Town Meadow Lane area is now almost complete and the survey of 2,683 houses in the New Brighton area has commenced.

Three talks were given to local organisations on Clean Air and Smoke Control Areas.

### **Food Hygiene**

I am pleased to report a large increase in the number of inspections of food shops and catering premises, the total number of inspections being 3,986, which gives an average of three visits to all food premises in the borough. 141 informal notices were issued regarding food premises and 211 items of repair or improvement were effected during the year.

A talk was given on Food Hygiene to a number of the School Meals Service staff.

### **Noise Abatement**

Eight complaints of noise nuisances were received, during the year, comprising five complaints relating to industrial plants and one each regarding cock-crowing, noisy neighbours and mobile food vendors. Informal action was successful in abating the nuisances in all cases.

### **Caravan Sites and Control of Development Act**

Four licences for seasonal use of sites were issued, under this Act. Three of these licences are for a period of ten years and the other for 1961 only.

Improvements to sanitary facilities, water supply, sewage disposal and precautions against the risk of fire are at present in progress and should be completed, before the commencement of 1962.

## **New Legislation**

A new Public Health Act came into force during the year. The Act includes new legislation which was previously covered by local Acts or Byelaws. The Act contains a section whereby nuisances caused by choked drains can be remedied much more expeditiously than under previous legislation. A useful section is also included which gives a public health inspector power to inspect second-hand furniture, etc., which is for sale and thus prevent the sale of verminous articles.

## **Staff**

Several staff changes occurred during the year.

Mr. A. Gilpin, Chief Public Health Inspector, left in June to take up an appointment with the Central Electricity Generating Board in London.

Mr. A. P. Thompson resigned from his post of Technical Assistant on the 8th September to take up an appointment with the Liverpool Regional Hospital Board Blood Transfusion Service. Both left with our best wishes for their future success.

It is with deep regret that I have to report the death after a long illness of Mr. R. L. Bascombe, who served the department faithfully for nearly forty years.

Mr. T. Barley, who was a district public health inspector for the City of Cambridge, was appointed as Deputy Chief Public Health Inspector and took up his new duties in September. Mr. T. Hayes was appointed to fill the vacancy caused by the resignation of Mr. A. P. Thompson and Messrs. D. J. Dickson and G. W. Jones were appointed as pupil inspectors under the newly constituted training scheme.

## **Examination**

During the year Messrs K. J. Warbrick and L. G. Ringrow were successful in the examination for the Royal Society of Health's Diploma for Smoke Inspectors.

## **Conclusion**

I wish to take this opportunity of expressing my appreciation for the support received from both the Chairman and Members of the General Health Committee and from Dr. Hall, Medical Officer of Health. May I also thank my colleagues in other departments for their goodwill and assistance. In addition, my best thanks are due to my Deputy, Mr. Barley, public health inspectors, technical assistants and office staff for their loyalty and hard work during the year.

## **Abatement of Nuisances and House Repairs**

Work in this field has followed the same pattern as in previous years relying on the nuisance provisions of the Public Health Act to enforce repairs to dwellinghouses.

Complaints during the year numbered 2,264, which is a very slight increase on the previous year. Even so, complaints received during 1961 were only half the number of those received ten years ago. This,



I feel, is in no small way due to the Council's slum clearance programme, under which 600 of the worst houses in the borough have been dealt with. The complaints and action arising out of them led to 14,867 visits being made to dwellinghouses, 728 preliminary and 351 statutory notices being served. A summary of the defects remedied indicates the effectiveness of the enforcement procedure.

Legal proceedings were resorted to on two occasions. In three other instances abatement notices were not complied with until after the cases had been passed, to the Town Clerk, who had threatened legal proceedings or had actually applied for a summons to be taken out against the offenders.

### Dwelling Houses

	<i>Nuisances Abated</i>
Roofs repaired ... ..	294
Gutters and Spouts repaired or renewed ... ..	141
External walls and chimneys repaired ... ..	148
Damp Proof courses provided ... ..	60
Yards paved or repaired ... ..	31
Internal walls and ceilings repaired ... ..	159
Doors, Windows, repaired, or renewed ... ..	155
Floors repaired or renewed ... ..	81
Rooms, passages, etc., cleansed or redecorated ... ..	2
Staircases, handrails, repaired ... ..	7
Fireplaces, stoves, flues, repaired or renewed ... ..	29
Sinks, baths, washbasins, repaired or renewed ... ..	25
Food stores provided, or improved ... ..	3
Water supply improved or reinstated ... ..	39
W.C.'s cleansed or redecorated, ... ..	11
W.C.'s repaired or provided ... ..	116
Soil/waste pipes, repaired, or renewed ... ..	31
Drains cleansed from obstruction ... ..	95
Drains repaired or improved ... ..	15
Drainer boards repaired or renewed ... ..	8
Miscellaneous Improvements affected ... ..	16
	<hr/>
Total ...	1,466

### General Environmental Public Health Nuisances Abated

	<i>Notices Abated</i>
Removal of Offensive Accumulations ... ..	7
Cleansing of Ditches and Streams ... ..	—
Cinemas, Dance Halls: Contraventions ... ..	6
Schools: W.C.'s — Repairs and Renewal ... ..	—
Schools: Other Nuisances ... ..	—
	<hr/>
Total ...	13



**Total Number of Notices Served (all Acts)**

	<i>Served</i>	<i>Abated</i>
Preliminary ... ..	1,042	1,014
Statutory ... ..	353	364
	<u>1,395</u>	<u>1,378</u>

<b>Legal Proceedings (Cases heard)</b> ... ..	2
No. of Nuisance Orders applied for ... ..	2
No. of Nuisance Orders obtained, ... ..	2
Total amount of fines and costs ... ..	17s. 0
No. of prosecutions for non-compliance with Nuisance Order ...	1
Total amount of fines ... ..	£5 0 0

**Work in Default**

In four cases the Corporation carried out work in default.

**No. OF FOOD BUSINESSES EXISTING WITHIN THE BOROUGH  
AT 31st December, 1961**

*Classification according to the areas administered by the District Public Health Inspectors*

Type	Seacombe	Egremont	Poulton	Liscard	New Brighton	Wallasey Village	Moreton	Total
School Kitchens and Canteens	10	9	3	10	7	7	11	57
Local Authority Hostels, Nurseries, etc. ...	1	2	—	—	3	—	2	8
Other Local Authority Premises ... ..	—	—	—	1	2	—	2	5
Grocers ... ..	32	44	20	25	21	32	23	197
Cafes ... ..	6	9	1	4	80	5	2	107
Greengrocers ... ..	15	24	14	21	10	21	15	120
Confectioners and Bakehouses	6	12	9	16	7	10	12	72
Sweets ... ..	28	40	15	33	35	25	22	198
Butchers ... ..	17	13	11	18	10	14	15	98
Fried Fish ... ..	10	9	3	9	9	3	7	50
Shellfish and Refreshment Stalls ... ..	—	—	—	—	27	—	5	32
General ... ..	17	12	11	21	17	8	24	110
Food Preparing Premises ...	1	1	1	2	4	2	2	13
Wet Fish ... ..	6	4	5	4	3	4	3	29
Chemists and Druggists ...	6	8	5	5	4	6	8	42
Club Premises and Canteens	4	3	—	1	6	11	3	28
Licensed Premises ... ..	20	13	8	21	26	9	9	106
Miscellaneous ... ..	—	3	4	—	—	—	—	7
<b>TOTALS</b> ...	<b>179</b>	<b>206</b>	<b>110</b>	<b>191</b>	<b>271</b>	<b>157</b>	<b>165</b>	<b>1279</b>

## FOOD AND DRUGS ACT, 1955: FOOD HYGIENE

Despite heavy demands made upon the time of the District Public Health Inspectors, it has been possible to maintain constant vigilance in this important field. It is through an educational process, constantly maintained, that good practices will eventually prevail throughout all food-handling activities.

### Food Premises

**No. of Visits to All Premises** ... .. 3,986

Viz.—

(a) Cafes, etc. (Visits) ... ..	296
(b) School Meals (Visits) ... ..	115
(c) Other F.P.P. (Visits) ... ..	280
(d) Licensed Premises (Visits) ... ..	154
(e) Ice Cream: (Visits re Registration) ... ..	11
„ Manufacturing Premises (Visits) ... ..	3
„ Sales and Storage Premises (Visits) ... ..	808
(f) Food Shops ... ..	3,204
(g) Sec. 16B Premises ... ..	243

### Work Carried out under Food Hygiene Regulations

#### Food Premises

Premises cleansed, or repaired ... ..	58
Equipment cleansed or repaired ... ..	14
Hot, cold water supply provided or improved, ... ..	18
Sinks, washbasins provided or improved ... ..	26
Food storage facilities provided or improved ... ..	14
Personal hygiene improved ... ..	10
Sanitary accommodation cleansed, repaired or improved	26
Miscellaneous improvements effected ... ..	45
Total ...	211

### Registered Food Premises

The Minister of Health has requested that a classification of registered premises be included in this report. The required information is as follows:—

#### List of Registered Food Premises, 1961

	No. of Premises	No. of Visits
Section 16 (a) Food and Drugs Act, 1955 ... ..	571	811
Section 16 (b) Food and Drugs Act, 1955 ... ..	157	243
Total ...	728	1,054

(N.B.—A classification of the types of premises registered under section 16 (a) is given in the part of the report dealing with ice cream).

## Summary of Types of Food Premises Registered under section 16 (b) Food and Drugs Act, 1955

[illegible]

## CONTROL OF ICE CREAM PREMISES

89 samples of ice cream were subjected to the methylene blue test — nine of them were placed in Grade 3 and six in Grade 4—the “unsatisfactory” grades. 21 samples were taken from two Wallasey manufacturers, five of which failed to reach the standard suggested by the Minister. About six samples were taken of each of the brands of ice cream manufactured outside the borough and two manufacturers failed to comply with the desired standard. A summary of the gradings is given in succeeding pages. 822 inspections of ice cream premises were made; 11 of the visits being in respect of new registrations to sell ice cream.

## ICE CREAM STATISTICS RELATIVE TO THE YEAR 1961

## Registrations Approved during 1961

Sale and Storage	...	...	...	...	...	...	...	...	...	11
										<hr/>
							Total	...		11

**Registrations Refused** ... .. Nil

<b>Registrations Cancelled</b>	...	...	...	...	...	...	...	Nil
--------------------------------	-----	-----	-----	-----	-----	-----	-----	-----

### Number of Premises on Register at close of Year

Storage only	...	...	...	...	...	...	...	...	...	4
Storage and sale	...	...	...	...	...	...	...	...	...	558
Manufacture, storage and sale	...	...	...	...	...	...	...	...	...	2
								Total	...	<u>564</u>



**Visits of Inspection**

Visits <i>re</i> applications for registration	...	...	...	...	...	11
Routine visits	...	...	...	...	...	811
						<hr/> Total ... 822 <hr/>

**ICE CREAM SAMPLING, 1961***Classification of Samples by Location of Manufacturer***Ice Cream Manufactured in Wallasey**

	No. of Samples
Grade 1	10
Grade 2	6
Grade 3	4
Grade 4	1
Total	<hr/> 21 <hr/>

**Ice Cream Manufactured outside Wallasey**

	No. of Samples
Grade 1	41
Grade 2	17
Grade 3	5
Grade 4	5
Total	<hr/> 68 <hr/>

*Result classified according to identity of Manufacturer*

Ice Cream sampled at point of sale within the  
County Borough District of Wallasey during 1961

**Factories outside Wallasey—Table I.**

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satis- factory	Unsatis- factory
1	5	2	3	—	—	*	—
2	7	6	1	—	—	*	—
3	6	2	1	1	2	—	*
4	7	6	1	—	—	*	—
5	7	6	1	—	—	*	—
6	6	3	3	—	—	*	—
7	6	5	1	—	—	*	—
8	7	3	3	1	—	—	*
9	9	6	2	1	—	*	—
10	2	—	—	1	1	Not classified dit to. dit to. dit to.	
11	3	2	1	—	—		
12	2	—	—	—	2		
13	1	—	—	1	—		
	68	41 (60.3)	17 (25.0)	5 (7.35)	5 (7.35)	7 4 not classified.	2

**Factories located in Wallasey—Table II.**

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4		
1	12	5	4	3	—	—	*
2	9	5	2	1	1	—	*
	21	10 (47.6)	6 (28.6)	4 (19.1)	1 (4.7)	—	2 (100.0)

NOTES.—1. Figures in parenthesis denote percentages.

2. The manufacturers numbered 10 to 13 Table I above are not classified owing to insufficient number of samples taken.

## ADMINISTRATION OF THE SHOPS ACT, 1950

Mr. Bascombe who was employed as a full time shops inspector and responsible for the inspection of all non food shops in the Borough was absent on sick leave from May until he died in December. In future the District Public Health Inspectors will be responsible for the inspection of both non food, and food shops in their districts.

The number of routine visits to shops was 3,718 and the 438 reinspections were made to secure abatement of the contraventions summarised in the following table.

### Nature of Contraventions remedied

Section 37 (1) Provision of seats for female employees	...	—
„ 38 (1) (a) Suitable and sufficient ventilation	... ..	—
„ (b) Maintenance of reasonable temperature	...	—
„ 38 (2) Provision of sanitary accommodation	... ..	1
„ 38 (3) Sanitary Accommodation cleansed, and repaired		32
„ 38 (4) Provision of suitable and sufficient lighting	...	1
„ 38 (4) Provision of washing facilities	... ..	5
„ 38 (5) Provision of facilities for meals	... ..	—
Notices and documents provided	... ..	321
General sanitary conditions improved	... ..	9

### Hours of Employment

Contraventions detected and remedied	... ..	2
--------------------------------------	--------	---

### Hours of Closing and Sunday trading

Number of contraventions noted	... ..	4
Number of warnings issued	... ..	—
Number of prosecutions instituted	... ..	4

Routine inspection to check compliance with hours of closing and Sunday trading has been discontinued, visits only being made on receipt of complaints.

## HOUSING

### Rent Act, 1957

#### PART I: Applications for Certificates of Disrepair

(1) Number of applications for certificates	... ..	18
(2) Number of decisions not to issue certificates	... ..	—
(3) Number of decisions to issue certificates		
(a) in respect of some but not all defects	... ..	10
(b) in respect of all defects	... ..	8
(4) Number of undertakings given by landlords under paragraph 5 of the First Schedule	... ..	16
(5) Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	... ..	—
(6) Number of Certificates issued	... ..	2

#### PART II: Applications for Cancellation of Certificates

(7) Applications by landlords to Local Authority for cancellation of certificates	... ..	1
(8) Objections by tenants to cancellation of certificates	... ..	—
(9) Decisions by Local Authority to cancel in spite of tenants' objection	... ..	—
(10) Certificates cancelled by Local Authority	... ..	1



## Summary of repairs executed on the 1 certificate of disrepair which was cancelled during the year

Roofs repaired ... ..	—
Gutters and Spouts repaired or renewed ... ..	—
External Walls and Chimneys repaired ... ..	1
Damp Proof courses provided ... ..	—
Yards paved and repaired ... ..	1
Internal Walls and Ceilings repaired ... ..	—
Windows and Doors repaired, or renewed ... ..	4
Floors repaired or renewed ... ..	—
Staircases and Handrails repaired, or renewed ... ..	—
Fireplaces and Flues repaired or renewed ... ..	2
Baths, Sinks or Lavatory Basins repaired or renewed, ... ..	2
Water supply improved ... ..	—
W.C.'s cleaned ... ..	—
W.C. repairs and renewals ... ..	1
Food stores provided, ... ..	—
Soil Pipes or Waste Pipes repaired or renewed ... ..	—
Drains repaired ... ..	—
Drainer Boards repaired or renewed ... ..	—
Miscellaneous repairs ... ..	—
External decorations ... ..	1
	<hr/>
Total ...	12

## Clearance and demolition of unfit houses

Work commenced during the year on the clearance of the houses in the Council's second five-year programme. The work is necessarily arduous and the procedure protracted, involving detailed inspection, the serving of notices and, where objections are lodged, the conducting of a public local inquiry by an inspector of the Ministry of Housing and Local Government. The following orders, etc., were made during the year:—

### *Demolition by Voluntary Undertakings*

- \*Fellowship House, Pasture Road.
- 28 Stuart Avenue.
- 15 Arrowe Avenue.
- 21 Lingham Lane.
- 5 Burden Road.
- 83 Bermuda Road.

### *Closure by Voluntary Undertaking*

- 6 Grosvenor Road.
- 252 Hoylake Road (part).
- Basement, 2A Falkland Road.

*Certificates of Unfitness*

151 Wallasey Village.

153     "           "

155     "           "

157     "           "

159     "           "

161     "           "

163     "           "

165     "           "

183     "           "

185     "           "

187     "           "

172     "           "

\* Denotes premises demolished during the year.

*Compulsory Purchase Order*

The Wallasey (Clearance No. 106) Cobham Road Compulsory Purchase Order, 1961.

85 Cobham Road.

89     "           "

93     "           "

A public local inquiry was held on 23rd, January, 1962. The Minister's decision has not yet been received.

The Wallasey (Clearance Nos. 107, 108 and 109) Beaconsfield Road, Demesne Street, and, Brighton Street Compulsory Purchase Order, 1961.

Nos. 3 and 4 to 16 Ellis Street.

Nos. 4, 6 to 18, 24 to 40 and 17 to 23, 23a, 25 to 33 Brighton St.

Nos. 5 to 17 and 4 to 18 Tabor Street.

Nos. 1 to 15 and 4 to 18 Shaw Street.

Nos. 31 to 63, and 48 to 62 Demesne Street.

Nos. 1 to 23 and 2 to 38 Beaconsfield Road.

Nos. 1 to 5 and 2 to 8 Servia Street.

Nos. 1 to 9 and 2 to 10 Bosnia Street.

This order will be sent to the Minister early in 1962, and if objections are made a public local inquiry will be held.

## Progress Report of Action under Housing Acts, 1930-1961

*Position as at 31st December, 1961*

	No. of dwelling houses demolished		Number of persons displaced
	Unfit	Other	
(1) Land coloured "pink" ... ..	1,111	—	2,943
(2) Land coloured "grey" ... ..	—	10	50

### *Unfit Houses not included in Clearance Areas*

	Number of houses	Number of persons displaced
(1) Housing Act, 1957:—		
(a) Houses demolished as a result of formal procedure under Sec. 17 (1) ... ..	306	1,001
(b) Houses demolished as a result of informal notices preliminary to formal procedure under Sec. 17 (1) ... ..	184	466
(c) Local Authority owned houses subject to certificates of unfitness ... ..	32	82
(d) Houses closed in pursuance of an undertaking given by the owners under Sec. (17)	12	38
(e) Parts of buildings closed (Sec. 18) ... ..	23	46
(f) Houses made fit:—		
(i) as a result of formal notices under Sections 9 to 12 ... ..	256	—
(ii) as a result of informal notices preliminary to formal procedure under Sections 9 to 12 ... ..	851	—
(1) Housing Act, 1957:—		
(g) Closing Orders made under Section 17 ...	3	14
(h) Demolition Orders determined and Closing Orders substituted under Section 26 ... ..	—	—
(i) Demolition Orders quashed under Section 24	—	—

### Overcrowding and Allocation of Tenancies

The Council continued to operate its Group-plus-Points Scheme for re-housing. Re-housing of families from unfit houses remains outside the points scheme. The following summary shows the shares of lettings now in force.

Overcrowded, tenants, and sub-tenants )	
and not overcrowded sub-tenants )	85%
Health ... ..	12%
Emergency ... ..	3%

All overcrowding cases must have been overcrowded, for at least one year to obtain the extra points allocated for overcrowding.

During the year, the housing circumstances of 497 families were investigated in connection with housing applications, 327 of these as a result of applications for inclusion in the Overcrowded, group. 151 families were found to be overcrowded for the purposes of the points scheme, which employs a standard better than that of the Housing Act.



Applications for rehousing on health grounds showed an increase of seven on the previous year. 170 applications were considered and these are analysed below. It is only possible for the most urgent cases to be recommended for rehousing, and only 22 applicants in this class received the approval of the Medical Officer of Health. In seven of these instances, the illness giving rise to the need for rehousing was pulmonary tuberculosis. The bulk of the applications came from persons suffering from old age, arthritis and high blood pressure. These cases all require ground floor accommodation.

### Housing Applications, 1961

*Analysis of 497 families investigated as a result of references from Housing Department.*

	Overcrowded		Not Over-crowded Points Scheme	Applications on Medical Gruonds			
				Tuberculosis		Other Cases	
	Housing Points Act, 1936 Scheme			Approved	Rejected	Approved	Rejected
Ten-ants	12	38	116	3	8	10	56
Sub-Ten'ts living in r'ms	46	113	60	4	13	5	71
Totals	58	151	176	7	21	15	127

### Provision of New Houses

The Borough Architect has provided the following report on the provision of new housing accommodation :—

	During 1961	Post-War Period incl. 1961	In Progress 31/12/61
Houses erected by private enterprise ... ..	90	1,796	181
Units of accommodation erected by Local Authority under Housing Acts ... ..	93	3,798	292
Tenant Ownership Houses erected, by Local Authority ...	—	174	—

### INSPECTION OF FACTORIES

The number of factories on the register at the end of the year was 259. 629 visits were made. An abstract of the results of these inspections in the form required by the Ministry of Labour and National Service is set out overleaf :—

*Administration of the Factories Act, 1937-1959.*  
*Inspections for Purposes of Provisions as to Health*

Premises	No. on Register	Number of	
		Inspections	Written Notices*
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced ... ..	17	37	—
Factories not included in above in which Section 7 is enforced by the Local Authority ... ..	228	570	10
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises) ...	14	22	—
Totals ... ..	259	629	10

\* In addition 15 verbal notices were given to occupiers regarding various matters.

*Cases in which defects were found*

Particulars	Found	Remedied	Referred	
			To H.M. Inspector	By H.M. Inspector
Want of cleanliness (S.1) ... ..	—	—	—	—
Overcrowding (S.2) ... ..	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary Conveniences (S.7):—				
(a) Insufficient ... ..	1	1	—	—
(b) Unsuitable or defective ...	34	30	—	10
(c) Not separate for sexes ...	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ... ..	—	—	—	—
Totals ...	35	31	—	10

*Outwork*

Wearing apparel-making, etc. Number of outworkers in Aug.  
list required by section 110 (i) (c) 1  
Visits made ... .. 1

**NOISE NUISANCES**

Eight complaints of noise nuisances under the Noise Abatement Act, 1960, were received during the year: These related to the following:—

(1) Industrial premises ... ..	5
(2) Food Vendor's chimes ... ..	1
(3) Cock-crowing ... ..	1
(4) Dwellings ... ..	1



(1) The managements of the industrial premises were interviewed and the abatement of the nuisances secured by co-operation and informal action.

(2) Although it was impossible to ascertain the actual food vendor concerned, all vendors in the neighbourhood were interviewed and no further nuisance occurred.

(3) The owner of the birds ceased to keep them.

(4) When investigated, this complaint of door banging by a neighbour did not appear to come within the scope of the Act, however, no further complaint was received.

## **WATER SUPPLY**

### **Town Area Supply**

#### *Quantity*

The total consumption of water in the town area represented 38.8 gallons per head per day, of which 30.8 was for domestic purposes, 0.32 gallons for shipping, 7.66 gallons for industry and commerce, and for the Cleansing Department 0.02 gallons.

#### *Source and Treatment*

Water is obtained from three sources — a bulk supply from Birkenhead Corporation's Lake Alwen, a supply from the River Dee works owned jointly by Birkenhead and Wallasey Corporations and the remainder from deep boreholes within the borough.

The borehole water is softened by the base exchange process and chlorinated. The Alwen bulk supply is treated by the Birkenhead Corporation before delivery. This treatment includes coagulation, filtration, pH correction and chloramine dosing. The River Dee supply receives similar treatment except that sterilisation is by superchlorination and dechlorination. Activated carbon treatment is used as necessary to control tastes.

There are no houses in the Borough without a piped supply, but six bungalows at "Castlefields," Ditton Lane, are supplied by means of a standpipe.

## **CHEMICAL AND BACTERIOLOGICAL EXAMINATION**

332 samples were submitted to bacteriological examination by the Water Department, of these 25 gave presumptive positive tests but only two showed B.Coli Type 1. After flushing the mains and resampling satisfactory results were obtained.

107 samples were submitted to routine chemical analysis by the Water Department.

Details of typical chemical analysis are given below.

The water supply of the area has been satisfactory, both as to quality and quantity.



Lead was not found in any of the samples of water subjected to chemical analysis.

	<i>District A</i>	<i>District B</i>
Colour (Hazen) ... ..	less than 5	less than 5
Hardness — Non-Carbonate ... ..	56	14
„ Carbonate ... ..	72	31
„ Total ... ..	128	45
Total Solids ... ..	364	97
Chloride ... ..	120	17
Nitrogen as Ammonia ... ..	0.008	0.008
Nitrogen as Albuminoid, Ammonia ...	0.026	0.036
Nitrogen as Nitrate ... ..	0.5	0.24
Nitrogen as Nitrite ... ..	Nil	Nil
Oxygen absorbed at 37°C in 4 hours	0.5	1.2
pH Value ... ..	6.9	7.5
Alkalinity as Calcium Carbonate ...	72	31
Residual Chlorine ... ..	Nil	Nil

Results in parts per million.

A—Water supplied in Old Wallasey, except Seacombe and Poulton.

B—Water supplied, in Poulton, Seacombe, Moreton and Leasowe.

Results of 32 samples taken by public health inspectors of untreated water at the borehole in Seaview Road and submitted to the Public Health Laboratory Service are as follows:—

*Details of Bacteriological Samples*

TOWN AREA SUPPLY

(i) Borehole at Seaview Road

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	27	32	31
1—4	4	—	1
5—9	—	—	—
10—20	—	—	—
21—50	—	—	—
over 300	1	—	—
	32	32	32

60 samples were taken by public health inspectors from taps of premises within the town area.

A summary of the results is given in the following table :—

(ii) Random Distribution Points

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	47	60	53
1—4	10	—	3
5—9	—	—	3
10—20	—	—	1
21—50	—	—	—
51—140	1	—	—
over 300	2	—	—
	60	60	60

One sample of the town supply taken by a public health inspector was submitted for full chemical examination. The result was as follows :—

Analytical results expressed in parts per million :—

Total solid matter in solution	...	...	...	...	...	...	79.2
Oxygen required to oxidise in 15 minutes	...	...	...	...	...	...	0.42
			4 hours	...	...	...	0.92
Ammoniacal nitrogen as N.	...	...	...	...	...	...	None
Albuminoid nitrogen as N.	...	...	...	...	...	...	0.92
Nitrous nitrogen as N.	...	...	...	...	...	...	None
Nitric nitrogen as N.	...	...	...	...	...	...	0.2
Combined chlorine	...	...	...	...	...	...	13.7
Total Hardness	...	...	...	...	...	...	32.0
Hardness (Carbonate)	...	...	...	...	...	...	17.0
Hardness (Non Carbonate)	...	...	...	...	...	...	32.0
pH Value	...	...	...	...	...	...	6.9

The water was found to be free from pollution and suitable for drinking and domestic purposes.

### Saughall Massie Supply

312 dwelling houses in the extreme western end of the borough receive their water supply from the West Cheshire Water Board. This water is obtained from deep wells at the Board's pumping stations and river supply taken from the River Dee at Chester and treated at the Board's Sutton Hall Treatment Works, Great Sutton. On the basis of consumption throughout the entire area supplied by the Board, the total consumption per head per day is 57 gallons, of which 33 gallons are for domestic purposes and 24 gallons are for industry and commerce.

During the year 129 samples of water from the pumping stations were submitted by the Board to the Counties Public Health Laboratories, London, S.W.1, for bacteriological examination.

The following table gives a summary of the results of the 25 samples taken from the Prenton Pumping Station.

No. of Colonies (on Agar)	No. of Samples		
	1 day at 37° C.	2 days at 37° C.	3 days at 20°—22° C.
0—	21	19	13
1—4	3	5	9
5—9	—	—	1
10—20	1	1	—
21—50	—	—	2
	25	25	25

An average of three chemical examinations of the water taken from Prenton Pumping Station is as follows (results in parts per million):—

Appearance	...	...	...	...	...	Clear—Bright with few particles.
Colour	...	...	...	...	...	Nil
Turbidity	...	...	...	...	...	less than 2.
Odour	...	...	...	...	...	Very slightly Chlorinous.
pH reaction	...	...	...	...	...	7.3
Electric conductivity	...	...	...	...	...	612.6
Chlorine present as Chloride	...	...	...	...	...	83.0
Hardness: Non-carbonate	...	...	...	...	...	76.6
Carbonate	...	...	...	...	...	178.3
Total Hardness	...	...	...	...	...	255.0
Nitrate nitrogen	...	...	...	...	...	3.3
Ammoniacal Nitrogen	...	...	...	...	...	0.0113
Albuminoid Nitrogen	...	...	...	...	...	0.000
Free Carbon Dioxide	...	...	...	...	...	16.666
Total Solids	...	...	...	...	...	406.666
Alkalinity as Calcium Carbonate	...	...	...	...	...	178.333
Nitrate Nitrogen	...	...	...	...	...	Absent
Oxygen absorbed	...	...	...	...	...	0.05
Residual Chlorine	...	...	...	...	...	0.0466
Iron	...	...	...	...	...	Absent
Zinc	...	...	...	...	...	Absent
Manganese	...	...	...	...	...	Absent
Other Metals	...	...	...	...	...	Absent

During the year 50 samples of water were taken by public health inspectors and submitted to the Public Health Laboratory for bacteriological examination.



Details of Bacteriological Samples

West Cheshire Water Board

Samples taken by public health inspectors  
at selected distribution points

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	32	50	44
1—4	13	—	5
5—9	2	—	1
10—20	1	—	—
21—50	—	—	—
51—100	—	—	—
over 300	2	—	—
	50	50	50

One sample of water supplied by the West Cheshire Water Board was taken by a public health inspector and submitted for full chemical examination. The result was as follows:—

Analytical results expressed in parts per million:—

Total solid matter in solution	...	...	...	...	...	...	318.2
Oxygen required to oxidise in 15 minutes	...	...	...	...	...	...	0.12
4 hours	...	...	...	...	...	...	0.54
Ammoniacal nitrogen as N.	...	...	...	...	...	...	None
Albuminoid nitrogen as N.	...	...	...	...	...	...	None
Nitrous nitrogen as N.	...	...	...	...	...	...	None
Nitric nitrogen as N.	...	...	...	...	...	...	3.3
Combined chlorine	...	...	...	...	...	...	52.1
Total hardness	...	...	...	...	...	...	186.0
Hardness (non-Carbonate)	...	...	...	...	...	...	69.0
Hardness (Carbonate)	...	...	...	...	...	...	117.0

pH value 7.4

The water is quite fit for drinking and all domestic purposes.

## SEWERAGE AND DRAINAGE

### House Drainage

Visits by public health inspectors in connection with same	1,167
Drains cleansed, from obstruction after service of notice ...	95
Drains repaired or renewed ... ..	15
Drain Tests: ... ..	42
Offensive Accumulations and Ditches: Nuisances Abated	7

The following sewerage works have been carried out during the year 1961:—

- (1) Upton Road, Sandbrook Lane Storm Relief Sewer. This sewer varies in diameter from 21" to 39" and cost approx. £40,000.
- (2) The 12" diameter sewer in Union Street was renewed and enlarged for part of its length at a cost of £5,000.
- (3) The sewer in Waterloo Road was renewed at a cost of approximately £4,000.
- (4) A very old brick sewer in Manor Road, and Seabank Road was renewed in 24" diameter concrete pipes at a cost of approximately £6,500.
- (5) A culvert serving the Gas Works in Gorsey Lane and other properties was extensively cleansed and repaired at a cost of approximately £1,300.
- (6) A small storm relief sewer was laid in Winterhey Avenue at a cost of £250.

Difficulties occur from time to time in the following areas as a result of inadequate sewer capacity:—

Wallasey Village

North Wirral outfall area of Moreton.

Central area of Liscard and, Poulton.

The Wallasey Village area was the subject of a consultant's report in 1960. As a result of this report, the Council decided to improve the drainage in this area by a number of stages. The first stage which includes the area to the west of Wallasey Village Station, is in course of preparation.

All development in the North Wirral outfall area of Moreton has been held up for a number of years due to inadequate drainage facilities. A scheme prepared by consultants on behalf of the four Authorities concerned recommended a new outfall into the Dee, but this has met with opposition on pollution grounds. It seems likely that the final scheme will include facilities for sewage treatment and disposal. This problem has not yet been solved.

In times of severe storms, certain isolated flooding occurs in the central area of Liscard and Poulton and preliminary surveys are to be made to ascertain the real extent of the problem.

## RODENT CONTROL

### Sewer Maintenance Treatments

Two routine sewer maintenance treatments were carried out.

Prior to the first routine treatment involving the use of zinc phosphide, a 10% test baiting of 589 manholes was undertaken. The number of takes — six complete and one partial — is a measure of the success of the work previously done.

As a result of the test baiting 23 manholes were baited using zinc phosphide and seven partial takes were recorded. Warfarin was again used in a section of the sewer system which for several years up to 1958 had shown a constant infestation, 181 manholes were baited in this area and only two partial takes were recorded.

A second treatment using Warfarin was carried out on the manholes showing takes in the test bait and first treatment with the necessary overlap. A total number of 44 manholes were baited and no takes were recorded.

### Surface Infestations

During the year 445 complaints of surface infestation were received compared with 452 in 1960. Details of the inspections and treatments carried out are given overleaf in the form required by the Ministry of Agriculture, Fisheries and Food. 485 separate treatments were carried out at 441 premises by rodent operatives of the Public Health Department. 407 of these premises were treated once in the year, while reinfestation involving two treatments occurred in 30 premises; three treatments were required at 11 premises, four treatments at two premises and seven treatments at one premises. The multiple treatments were invariably due to reinfestations. Warfarin has come to be accepted as the basic rat poison. During the year it was used in all of the 485 treatments by council rodent operatives.



	Type of Property				
	Local Authority	Dwelling-houses	Agricultural	All other (incl. Business & Industrial)	Total
I. Total number of properties in Local Authority's District ...	360	30,958	55	4,071	35,444
II. Number of properties inspected by the Local Authority as a result of (a) notification or (b) survey under Damage by Pests Act (c) otherwise, i.e. when visited primarily for some other purpose ...	(a) 31	330	1	83	445
	(b) 6	464	3	64	537
	(c) 503	14,846	50	8,636	24,035
III. Number of properties (under II) found to be infested by rats ...	Major Nil	Nil	Nil	1	1
	Minor 13	140	2	26	181
IV. Number of properties (under II) found to be infested by mice ...	20	188	Nil	54	262
V. Number of infested properties (under III & IV) treated by the Local Authority ...	33	327	2	79	441
VI. Number of notices served under Section 4 :					
(1) Treatment ...	Nil	Nil	Nil	Nil	Nil
(2) Structural Works (i.e., Proofing) ...	Nil	Nil	Nil	Nil	Nil
Total ...	Nil	Nil	Nil	Nil	Nil
VII. Number of cases in which default action was taken by Local Authority following issue of notice under Section 4	Nil	Nil	Nil	Nil	Nil
VIII. Legal Proceedings ...	Nil	Nil	Nil	Nil	Nil
IX. Numbers of "block" control schemes carried out ...	—	—	—	—	3

## NOTES

Note 1. A property means a property separately entered in the Valuation Roll for the area.

Note 2. Council houses are included under Dwelling Houses. Premises used by Local Authority for purposes of trade are included under Business or Industrial Premises.

Sewers are not included.

Only properties devoted to agricultural or horticultural production are included under Agricultural Properties. Combined dwelling and business premises where occupied by the same person are included under Business Premises, otherwise they are entered separately.

Note 3. II, III, IV and V excepting II (c) relate to the number of properties inspected as defined in Note 1 and not to the number of inspections, infestations or treatment at each property.

## PUBLIC HEALTH CONTROL OF SWIMMING POOLS

Swimming facilities in Wallasey include the indoor baths at Guinea Gap, the outdoor pools at New Brighton and Harrison Drive. In each case, sea water is used, the water being pumped from the River Mersey for Guinea Gap Baths, from the Marine Lake for New Brighton Pool and from the Irish Sea for the Derby Bathing Pool. During operation, the swimming water undergoes a constant filtration process utilising Bell's Gravity Filters and modern chlorination equipment is used to ensure a safe and sterile water. The turnover period at Guinea Gap is once every three hours and, at the two outdoor pools once every five hours. Guinea Gap Baths remain open for public use throughout the year and the water is heated; the two outdoor pools are only in use during the summer months and the water is not heated.

79 visits of inspection were made to the Council's swimming baths by public health inspectors, compared with 49 in 1960. Tests for residual chlorine amounted to 65. Samples for bacteriological examination numbered 158, or 28 more than during the previous year.

At Guinea Gap first class bath 19 tests for chlorine were made, the average result being 0.78 parts per million at the inlet and 0.69 parts per million at the outlet. The corresponding averages of 21 tests at the 2nd class bath were 0.77 and 0.70 parts per million.

The maintenance of residual chlorine in the open air pools at New Brighton and Harrison Drive is more difficult. At New Brighton pool the average of 13 checks gives inlet contents of 0.42 parts per million on the east side and 0.31 on the west side, with 0.25 at the outlet. At Derby Pool 12 tests were done and the average residual chlorine was 1.0, and 0.38 and 0.13 parts per million at the inlet, centre and outlet of the pool.

### Derby Pool

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	18	22	22
1—4	5	4	4
5—9	—	—	—
10—20	2	—	—
21—50	—	—	—
51—100	1	—	—
	26	26	26

**New Brighton Pool**

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	19	26	26
1—4	4	—	—
5—9	1	2	2
10—20	—	—	—
21—50	1	—	—
51—140	1	—	—
over 300	2	—	—
	28	28	28

**Guinea Gap Baths**

No. of Organisms	No. of Samples		
	1 day at 37° C.	B. Coli. per 100 mls.	Total Coli. organisms per 100 mls.
0	89	104	100
1—4	7	—	4
5—9	—	—	—
10—20	2	—	—
21—50	3	—	—
over 300	3	—	—
	104	104	104

**Chemical Examination — Specimen Analysis****New Brighton Swimming Pool**

Analytical results expressed in parts per million:—

Total solid matter in solution ... ..	29,000.0
Oxygen required to oxidise in 15 minutes ... ..	0.58
4 hours ... ..	1.05
Abluminoid nitrogen as N. ... ..	0.04
Ammoniacal nitrogen as N. ... ..	0.04
Nitrous nitrogen as N. ... ..	None
Nitric nitrogen as N. ... ..	None
Combined chlorine ... ..	15,200.0
Free Chlorine ... ..	4.6
pH value ... ..	7.7

This water is quite satisfactory for swimming bath use.



AIR POLLUTION

Summary of Observations and Visits

Clear Air:

Industrial Observations — Formal	...	...	...	...	...	69
Industrial Observations—Informal	...	...	...	...	...	361
Industrial Visits	...	...	...	...	...	46
Domestic Observations	...	...	...	...	...	171
Domestic Visits	...	...	...	...	...	181
Other Visits to Smoke Control Areas	...	...	...	...	...	37
Other Visits to Proposed, Smoke Control Areas	...	...	...	...	...	6,010
Visits to Deposit Gauges	...	...	...	...	...	63

Measurement of Air Pollution

Measurements were continued during the year on the four deposit guages for sootfall and the five guages for the concentration of sulphur dioxide in the atmosphere.

TABLE 1

Station	Rainfall		Total Dissolved Matter		Total Undissolved Matter		Total Solids	
	M.M.		Tons per sq. mile per month					
	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.
Oakdale Road Oct., 1960— March, 1961	83		10.34		13.53		23.87	
April, 1961— Sept., 1961		73.66		8.38		10.93		19.31
Gorsedale Road School Oct., 1960— March 1961	79		5.01		12.58		17.59	
April, 1961— Sept., 1961		66		7.92		9.43		17.35
Saughall Massie Oct., 1960— March, 1961	75		6.85		3.90		10.75	
April, 1961— Sept., 1961		62		6.05		2.75		8.80
Seaview Road Oct., 1960— March, 1961	80		8.05		8.06		16.11	
April, 1961— Sept., 1961		74		7.13		5.97		13.10

Table 2

Mean Monthly Rates of Total Deposits for Winter and Summer Periods  
October, 1960—September, 1961

Town	Station	Total Solids	
		Tons per sq. mile per month	
		Winter	Summer
Wallasey ... ..	Oakdale Road ... ..	23.87	19.31
	Gorsedale Road School ...	17.59	17.35
	Saughall Massie ... ..	10.75	8.80
	Seaview Road ... ..	16.11	13.10

Table 3

Estimation of Sulphur Dioxide by the Lead Peroxide Method, for Winter and Summer Periods, October, 1960 — September, 1961.

Rate of Absorption of Sulphur Dioxide expressed as  
Mg.  $\text{SO}_3$ /day/100  $\text{Cm}^2$

Station	Winter Period	Summer Period	Oct., 1959 Sept., 1960
Oakdale Road Oct., 1960 — March, 1961 April, 1961 — September, 1961	3.398	1.260	2.329
Gorsedale Road School Oct., 1960 — March, 1961 April, 1961 — September, 1961	3.53	1.315	2.423
Saughall Massie Oct., 1960 — March, 1961 April, 1961 — September, 1961	1.5	0.479	0.990
Seaview Road Oct., 1960 — March, 1961 April, 1961 — September, 1961	3.069	1.303	2.186
Town Hall, Wallasey Oct., 1960 — March, 1961 April, 1961 — September, 1961	8.01	2.744	5.377

#### NOTE

- (1) In the above classification the figure for the winter period consists of an average of the recordings for the months of October, 1960, to March, 1961. The figure for the summer periods consists of an average of the recordings for the months of April, 1961, to September, 1961.

Average Total Deposit Per Square Mile of the Borough Per Year  
October, 1960 — September, 1961 — 190.32 tons

### Smoke Control Areas

The development of the Council's policy in relation to Smoke Control Areas has continued and Wallasey now has six confirmed Smoke Control Orders and a seventh area awaiting confirmation by the Minister of Housing and Local Government. The preliminary surveys of further areas are progressing.



Order No.	Name and Date	Acres	No. of Dwellings	No. of other Premises	Date of Operation	Stage of Development
1	The Wallasey (Church St.) Smoke Control Order No. 1, 1958	11	218 (when completed)	4	1.10.1959	Operative
2	The Wallasey (Moreton) Smoke Control Order No. 2, 1959	125	1,070	25	1.9.1960	Operative
3	The Wallasey (Upton Rd.) Smoke Control Order No. 3, 1959	31	241 (when completed)	6 (when completed)	1.10.1960	Operative
4	The Wallasey (Fender Lane) Smoke Control Order No. 4, 1960	340	250 (when completed)	1	1. 2.1961	Operative
5	The Wallasey (Brighton St.) Smoke Control Order No. 5, 1960	107	1,343	241	1. 5.1962	Confirmed by the Ministry of Housing and Local Government ditto.
6	The Wallasey (Leasowe) Smoke Control Order No. 6, 1960	1,920	3,247	70	1. 9.1962 (proposed)	Awaiting confirmation by the Ministry of Housing and Local Government
7	The Wallasey (Seacombe/Poulton) Smoke Control Order No. 7, 1961	710	6,073	482	1. 5.1964 (proposed)	Survey in progress ditto. ditto.
—	Town Meadow Lane	335	1,581	30	—	
—	New Brighton	329	2,683	342	—	
—	Upton Park	93	22	—	—	

## Contraventions

Verbal and/or written warnings of first contraventions of smoke control orders were issued to 81 premises. In one case a second contravention occurred. This was reported to the General Health Committee which decided that a very strong warning letter should be sent by the Town Clerk.

The nature of the various offences was as follows:—

Burning of coal	34
Burning of wood and paper	24
Burning of kitchen waste refuse	10
Not known (due to not being able to get into premises)	13

## Industry

During the year improvements to plants by the installation of new firing equipment was effected at three industrial premises. At a fourth plant the use of an unsatisfactory boiler was discontinued.

## DISINFESTATION

Benzine hexachloride in kerosene has been used for the majority of infestations of cockroaches. In addition to the work done by the Corporation's operator, details of which are set out below, surveillance was exercised over the hydrogen cyanide fumigation of two dwelling houses.

### Disinfestation

#### Inspections

(1) No. of complaints investigated	216
(2) No. of private houses inspected as a result of (1)	123
(3) No. of local authority houses inspected as a result of (1)	54
(4) No. of premises other than dwelling houses inspected as a result of (1)	39
(5) No. of premises found to be verminous:	
(a) Bed Bugs	30
(b) Fleas	16
(c) Cockroaches	126
(d) Other Vermin	44
	<hr/> 216

#### Treatment by Council's Operative

No. of treatments on repayment	377
No. of treatments without charge	15
	<hr/>
Total No. of treatments	392
	<hr/>
No. of premises covered by treatments	216
	<hr/>
No. of treatments with D.D.T. spray	67
No. of treatments with other spray insecticides	323
No. of treatments with other methods	2
	<hr/> 392

Fees received, £222 16s. 11d.

## RAG FLOCK AND OTHER FILLING MATERIALS ACT

During the year three samples were submitted to prescribed analysis, and were found to comply with the prescribed standards of cleanliness.

### *Type of Filling Material*

B.S.S. 1425: 1951	No. of Samples
Cotton Felt ... ..	1
Rag Flock ... ..	—
Washed Flock ... ..	1
Coir Fibre ... ..	1
B.S.S. 1762: 1951	
Woollen Mixture Felt ... ..	—

Five premises are registered under the Act. In the main they are occupied by upholsterers whose main business is the repair or refilling of upholstered articles of furniture.

## CONTROL OF CAMPING

169 visits were made to licensed sites during the year.

Eight private sites were licensed, from the end of March until the first week in October. In addition to the above, branches of the Caravan Club held two camps on land situated on the promenade which is owned by the Corporation.

No. of sites licenced for tents during 1961 ... ..	4
No. of sites licenced for caravans during 1961 ... ..	4
No. of cases of unlicensed camping detected during 1961 ...	2
No. of visits to unlicensed land ... ..	10
No. of visits to licensed land ... ..	169
Inspection of structures ... ..	3,054
Nuisances abated after notice ... ..	5

## KEEPING OF ANIMALS AND PET SHOPS

The total number of pet shops is 12, which is a disproportionately high number for the size of the town. All the licences are subject to standard conditions approved by the Council. These conditions are based on local conditions, regard having been paid to recommendations of the Association of Municipal Corporations and the R.S.P.C.A.

Visits to pet shops ... ..	19
Visits to other premises ... ..	54
Animal nuisances abated ... ..	1



## MISCELLANEOUS INSPECTIONS

	<i>Visits</i>	<i>Nuisances Abated</i>
Schools ... ..	71	—
Cinemas, dance halls, etc. ... ..	22	—
Sub-let rooms ... ..	280	—
Public conveniences ... ..	238	6
Local Land Charges (search) ... ..	1,597	—
Measurements of rooms for permitted numbers ...	773	—
Interviews with building contractors ... ..	435	—
Offensive trades ... ..	4	1
Other Visits ... ..	5,221	—

## WALLASEY CORPORATION ACT, 1958

### Registration of Hairdressers

During the year nine applications were granted for the registration of premises for use as hairdressing establishments, there being a total of 119 premises registered within the Borough.

## PART VI.

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### *Welfare Services*

**(National Assistance Act, 1948)**

## WELFARE SERVICES

### Residential Accommodation

Of the Welfare Committee's five Homes for Old People, "Lamorna", "Redcliffe", "Newholme", "Fernleigh" and "Manor Grange", the three original ones were fully utilised throughout the year, and of the new ones, the first to open was soon filled to capacity and the last to open near the end of the year, was filling up as quickly as was practicable.

At the end of the year there were 130 persons on the Waiting List for accommodation in Homes compared with 96 at the beginning. It is envisaged that a further three 40-bedded Homes will be built in the future.

The following are the statistics relating to accommodation provided by or on behalf of the Council in 1961.

	No. <i>resident</i> on 1.1.61	Admissions <i>during</i> 1961	Discharges <i>during</i> 1961	No. <i>resident on</i> 31.12.61
"Newholme" ... ..	43	26	24	45
"Lamorna" ... ..	20	9	11	18
"Redcliffe" ... ..	17	19	18	18
"Fernleigh" ... ..	—	53	5	48
"Manor Grange" ... ..	—	5	1	4
David Lewis Epileptic Colony ...	3	2	1	4
Home for Epileptics, Maghull ...	6	1	2	5
Turner Memorial Home of Rest, for Cripples, Liverpool ... ..	6	1	2	5
Holm Hill, West Kirby ... ..	1	—	—	1
Old Peoples Hostel, Liverpool ...	1	—	—	1
Leeds House, New Brighton ...	1	3	2	2
"Springhill", Nelson ... ..	1	1	—	2
Middleton Home for the Blind, Maldon, Essex ... ..	1	—	1	—
Charles Best House (Diabetics) Parkgate ... ..	1	—	1	—
St. Vincent's Hospice, Liverpool	1	—	1	—
Tithebarn Home, Crosby ...	1	—	—	1
British Legion Home, Cromer, Norfolk ... ..	1	—	—	1
Methodist Home for the Aged, Fulwood Park, Liverpool ...	1	—	—	1
Royal Alfred Home for Aged Seamen, Belvedere, Kent ...	1	—	—	1
Alexian Bros Home, Moston, Manchester ... ..	1	—	1	—
R.N.I.B. Oldbury Grange, Bridgenorth ... ..	—	2	2	—
R.N.I.B. Sunshine Home, Southport ... ..	—	1	1	—



Reception Centre, 51 Martins Ln.	17	145	133	29
4, Tower Street, Lower Flat ...	6	3	6	3
4, Tower Street, Upper Flat ...	5	—	—	5
8, Tower Street, Lower Flat ...	3	7	7	3
8, Tower Street, Upper Flat ...	4	3	4	3
8, Church Road, Flat A ... ..	5	1	—	6
8, Church Road, Flat B ... ..	3	4	3	4
8, Church Road, Flat C ... ..	5	1	—	6
10, Church Road, Flat A ... ..	6	7	7	6
10 Church Road, Flat B ... ..	5	4	4	5
10 Church Road, Flat C ... ..	8	7	8	7
15 Percy Road ... ..	10	1	—	11
2, Falkland Road ... ..	—	8	—	8
14, Falkland, Road ... ..	—	8	—	8
53, Oxton Road ... ..	—	6	—	6
84, Littledale Road ... ..	—	5	—	5
75, Withens Lane ... ..	—	14	8	6
116, Liscard Road ... ..	—	6	—	6
<b>Totals ...</b>	<b>184</b>	<b>353</b>	<b>253</b>	<b>284</b>

### Temporary Accommodation

It is the duty of the Council under Section 21(b) of the National Assistance Act, 1948, to provide:—

“temporary accommodation for persons who are in urgent need thereof being need arising in circumstances which could not reasonably have been foreseen or in such other circumstances as the Authority may in any particular case determine.”

The accommodation provided under this part of the Act consists of ten sub-standard flats, a Reception Centre consisting of 5 units of accommodation with communal cooking and washing facilities provided, and seven houses newly acquired which are termed, “intermediate accommodation.”

### Registration of Old Persons' Homes

There were at the end of 1961 four homes in Wallasey registered under the provisions of the National Assistance Act, 1948.

### Removal of Persons in need of Care and Attention (Section 47, National Assistance Act, 1948)

During the year two persons, a man and a woman, being in urgent need of care and attention, were removed to Homes for Old Persons' under the above Section of the National Assistance Act, 1948.

The elderly women removed by Magistrate's Orders to Part III Accommodation in 1954 and 1959 respectively, are still accommodated.

## **Burial of the Dead**

During the year under Section 50 of the National Assistance Act, six burials were arranged, in cases where it appeared that no suitable arrangements for the burial had been, or were being made otherwise.

Of the six, the costs of five were recovered during the year. Half the cost of the remaining one was recovered during the year and negotiations are in progress with the Treasury Solicitor for the recovery of the balance.

## **Protection of Property**

It is the duty of the Welfare Committee to ensure the safety of moveable property of persons when they enter homes or hospitals if no suitable arrangements are being made. This entails notifying the Police that the house is empty, checking that doors and windows are secure and possibly taking into protection valuables, cash or furniture.

All items except cash are stored at 114-116 Church Street, small items of value being kept in a safe. Cash is handed to the Borough Treasurer who places it in Suspense Account.

Occasionally advice is given to the relatives of mental patients on the procedure to be adopted when applying for appointment as Receiver of the Patient's Estate.

The Court of Protection and the Official Solicitor are notified of cases which may be their concern. Both these bodies are given any assistance they require in dealing with these cases.

## **Recovery of Expenses from Persons liable to maintain Dependants**

It has not been necessary to apply to the Petty Sessional Court for any recovery of expenses during the year.

## **Entertainments and Outings**

The Annual Outing this year followed the same pattern as in recent years, consisting of a Coach Tour of Wirral followed by tea at Little Sutton, as usual the Outing was thoroughly enjoyed by the residents.

Once again the Christmas festivities were thoroughly enjoyed by the old people, the Homes being well supplied with Christmas Fare and Decorations.

Throughout the year, and particularly at Christmas and Harvest Festival time, gifts of fruit, flowers, sweets, reading matter, clothing, and other articles for use by the residents, were gratefully accepted from Schools, Churches, etc., and private individuals.

## **Community Welfare**

The plight of many old people must again be the subject of our attention.



There are many waiting for accommodation in Homes, and the Welfare Committee are fully aware of the need for more Homes in the Borough, and have made provision in the five year capital building programme.

All the domiciliary services of the Health Department are available to old persons living in their own homes. During 1961, 70,811 hours were devoted by the Home Help service to the old people in the Borough.

The Women's Voluntary Service and the Wallasey Voluntary Old People's Welfare Committee members once again worked hard throughout the year, and I should like to record my appreciation for all the voluntary work done in the Borough for old people.

During the year the Meals-on Wheels Service, with the help of a new van, once again worked to full capacity providing meals for those in need.

## **Rehabilitation Work**

During her second year the Welfare Officer for Rehabilitation Work was again fully occupied with the duties of her post, which include giving advice and practical help in matters such as evictions, pending evictions and rent arrears, household budgeting and so on.

This Officer's duties also include visiting and offering advice to the occupants of temporary accommodation managed by the Welfare Committee.

## **BLIND WELFARE**

### **Registration of Blind Persons**

During the twelve months ending 31st December, 1961, 57 people were examined by Mr. W. Dunlop Hamilton, of these 43 were found to be blind.

Of the remaining 14, seven were placed on the Observation Register for Partially Sighted, three re-examined as Partially Sighted, four were certified not blind.

Of the 43 certified blind, blindness occurred in the following age groups :—

2 years ...	...	...	...	...	2
40—49 years	...	...	...	...	1
50—59 „	...	...	...	...	1
60—64 „	...	...	...	...	1
65—69 „	...	...	...	...	5
70—79 „	...	...	...	...	16
80—84 „	...	...	...	...	11
85—89 „	...	...	...	...	5
90 and over	...	...	...	...	1



# Statement re: Incidence of Blindness in Registered New Cases

	Cause of Disability		
	Glaucoma	Cataract	Others
(1) Number of cases registered during the year for whom the following is recommended :—			
(a) No treatment ... ..	2	6	6
(b) Treatment (Medical, Surgical, Optical) ... ..	6	6	17
(2) Number of cases registered during the year at (a) and (b) above, which on follow up action have received treatment ... ..	6	6	17
	<i>Ophthalmia Neonatorum</i>		
(i) Total number of cases notified during the year ... ..		Nil	
(ii) Number of cases in which :—			
(a) Vision lost ... ..		Nil	
(b) Vision impaired ... ..		Nil	
(c) Treatment continuing at end of year ... ..		Nil	
	M.	F.	Total
No. on Register at 1st January, 1961	100	145	245
No. added during the year :—			
New Cases ... ..	9	34	43
Transfers from other Towns ...	4	3	7
	<hr/> 113	<hr/> 182	<hr/> 295
Less No. of Removals from Register owing to :—			
Leaving Wallasey ... ..	1	4	5
Deaths ... ..	6	17	23
	<hr/> 7	<hr/> 21	<hr/> 28
	<hr/> 106	<hr/> 161	<hr/> 267

From 1st January to 31st December, 1961, two Certificated Home Teachers were employed.

During the year 2,452 visits were made to Blind, and Partially Sighted Persons. In addition to these visits the Home Teachers attended six Social Functions given by organisation on behalf of the Blind.

62 classes teaching Occupational Therapy were held during the year. Afternoon and evening classes are held in the house bought by Wallasey Corporation for the Disabled, and a keen interest is shown by all who attend.

The following Crafts are taught :—

Seagrass Seating; Sontwine Seating; String Bag Making; Rug Making; Basketry; Bath Mats; Knitting and Weaving.

At the Annual Fete and Gala held at Central Park, Wallasey, in July, 1961, articles made by the blind were sold.

A Handicraft Exhibition was held at Hesketh Hall, Port Sunlight, in December, 1961, and the Wallasey Blind exhibited and sold articles there, the two Home Teachers being in attendance.

The Home Teachers have also taught Handicrafts, Braille, and Moon to blind people in their Homes.

Five blind people accompanied by one Home Teacher went to Manchester in May, 1961, to take part in the Annual Braille Reading Competition organised by the National Library for the Blind. One of the five was successful in winning a prize in the class for readers who have learnt Braille during the past five years.

Holidays have been arranged for a number of blind people to spend a week or fortnight in Holiday Homes, and Home Teachers escorted them to and from their Homes.

One Home Teacher accompanied a totally Deaf-Blind man aged 60 years, for a week's holiday at Blackpool and both had a most enjoyable time. The holiday was organised for the Deaf-Blind by the North Regional Association for the Blind, Leeds.

A totally blind lady, aged 74 years, spent one week's holiday at the British Red Cross Society's Holiday Home in Richmond, Yorkshire, and a Home Teacher escorted her to and from the Home.

## **Training and Employment**

A registered blind man, aged 59 years, was admitted to the Social Rehabilitation Centre, Oldbury Grange, for a three months' course, and he derived much benefit from it.

A blind baby aged two years was admitted to the Sunshine Home, Southport, in April, and is making steady progress.

A young man, totally blind, aged 22 years, has been successful in passing the Intermediate LL.B. Examination at Liverpool University's Faculty of Law, and continues to make excellent progress.

Two blind boys aged three years, have been interviewed at St. Vincent's School for the Blind, Liverpool, and accepted for admission when they attain school age.

A Registered blind boy, aged 14 years, was transferred from St. Vincent's School for the Blind, Liverpool, to the Cardinal Allen Grammar School for sighted children in September, 1961. This boy is the first blind one in the British Isles to be admitted to a sighted Grammar School. He enjoys being amongst sighted children.

A baby girl, registered blind, aged two years and 10 months, visited the Parents Unit, Royal National Institute for the Blind, Newton Abbot, South Devon, accompanied by her Mother, for 10 days, and have both derived much benefit from the Course. The Local Authority paid for their maintenance.



A Partially Sighted lady, aged 26 years, went for a three months' course of Industrial Rehabilitation at the Royal National Institute for the Blind Centre at Torquay, in September, and has remained there working as a Braille Instructress.

A totally blind man aged 30 years, completed his training in Brush Making at the Liverpool Workshops for the Blind, in September, 1961, but was found unsuitable for permanent employment. He attends the Handicraft Classes organised by the Home Teachers.

A Course of Cookery Classes were held from September to December, 1961, for six blind people by courtesy of the North Western Gas Board and they derived much benefit and were most grateful for being able to participate.

### **Welfare Services for the Partially Sighted National Assistance Act, 1948**

There are 55 persons on the Observation Register for the Partially Sighted. During the year 89 visits were made to Partially Sighted persons. People on this Register are permitted to attend Handicraft Classes and Social Functions held for the Blind.

### **Talking Book Machines**

Four Talking Book Machines are distributed for blind people in their Homes for three monthly periods, and this service is greatly appreciated by all who participate.

### **Wireless Sets**

The British Wireless for the Blind generously allocated 12 new V.H.F. Bush models and one Transistor set for the Blind in Wallasey.

### **Free Travel Vouchers**

Through the courtesy of the Wallasey Passenger Transport Committee, Registered Blind persons still continue to receive travel vouchers enabling them to travel free on the Buses and Ferries.

During the year 1961 the Crosville Motor Bus Company have kindly sent 17 bus passes at reduced fare for Wallasey blind persons.

The Liverpool and North Wales Steamship Company allowed the blind persons to travel on the Llandudno boats at a reduced rate. All these facilities are greatly appreciated.

### **Voluntary Organisations**

A number of blind persons have benefited by the Meals-on-Wheels Service organised by the Women's Voluntary Service.

The Women's Voluntary Service have also acted as escorts to the blind people.

The Voluntary Blind Welfare Committee hold weekly socials and organise an annual outing and a Christmas party for all the blind in Wallasey, the cost being subsidised by the Local Authority.

Thanks are due to all those Voluntary Agencies who have given their services to the blind in Wallasey, i.e. Social Functions, Theatre Tickets, and gifts in the past twelve months, also to members of the Rotary Club who have conveyed many people to and from these functions.



## **WELFARE OF HANDICAPPED PERSONS**

### **(Other than the Blind and Partially Sighted)**

During the year one Welfare Officer was employed; 820 domiciliary visits were made, 65 visits to social clubs and functions for the disabled (many of which were arranged through the Welfare Department) 21 escorts to hospitals and 34 Committee Meetings attended.

One Craft Teacher has been employed for the purpose of diversionary occupation. A class is held each week at Wallasey and Moreton, the numbers attending are 30 and 25 respectively. Men and women of all ages and disabilities are taught basketry, rug work, sea-grass stools etc., and the Wallasey Ambulance Service is called upon to convey the more severely disabled, many of whom are confined to wheel-chairs. Since the inclusion of the mentally disordered in the scheme for handicapped persons, two extra classes have been organised for sub-normal patients of both sexes. They are successful and well attended.

Three exhibitions have been held—one at the Wallasey Gala in June, the second during "Help the Disabled Week" in October, and the third at Hesketh Hall, Port Sunlight, in December. The last named, lasting three days and most local organisations for the blind and disabled took part.

The Welfare Centre for Handicapped, 74 Penkett Road, was opened in August after extensive alterations, and handicraft classes for handicapped and blind suspended temporarily were soon in operation. The social activities in connection with voluntary organisations were resumed there, and the building is now being fully used. It is proving to be the centre of most activities in relation to handicapped people in the Borough.

Personal and domestic aids are supplied to individual cases to enable them to become more independent, and adaptations have been carried out at both privately owned and Corporation property—doors widened, downstairs toilets, hand rails etc., concrete paths and motor crossings have been constructed to accommodate invalid tricycles supplied by the Ministry of Health. Wallasey War Pensioners have been considered eligible for Mini-minor Cars and have been supplied with the new vehicles.

Special car badges for disabled drivers have been issued at the request of the Ministry of Health and these are obtainable on application to the Welfare Department.

The chiropody service is now available to handicapped persons on the recommendation of General Practitioners.

Close liaison is kept with statutory and voluntary organisations concerned with the welfare of the disabled in the area. To illustrate this, through the auspices of the Welfare Department a young severely disabled girl, housebound, was provided with a motorised invalid tricycle and subsequently employment at the local Remploy Factory. She was encouraged to take part in the social events at the Welfare

Centre, and in the course of time met and married a young handicapped man, also employed, at the Remploi Factory. They were provided with a Corporation flat where it is possible to keep the tricycle and they now have a perfectly healthy baby boy born at Highfield Maternity Hospital. A Health Visitor attended frequently and a Home Domestic Help provided for as long as was necessary. The family are completely independent though the Mother is only able to walk a few steps. This is an example of the co-ordination of the services provided by the Local Authority with a happy ending.

The North Western Gas Board have designed a specially constructed gas stove for disabled people, and many have availed themselves of this opportunity and have been helped financially with the hire charge by the National Assistance Board.

Permanent residential accommodation has been provided for handicapped people at the following Homes:—

Turner Memorial Home of Rest, Liverpool	...	5 men
Maghull Homes for Epileptics, Maghull	... ..	2 women, 3 men
David Lewis Epileptic Colony, Cheshire	... ..	3 women, 1 man
British Legion Home, Norfolk	... ..	1 man

Financial responsibility has been accepted in each case by the Welfare Committee.

## Rehabilitation, Training and Employment

Courses of rehabilitation and training are provided by the Ministry of Labour and National Service and the day centre opened at Aintree is proving beneficial to many Wallasey disabled as they are able to travel to and from their homes without difficulty.

The aim is to restore a maximum degree of fitness for employment to persons, who because of sickness, accident or long unemployment need a chance to regain confidence in their ability to get and keep a job. 55% of those trained obtain employment on finishing the course provided at Aintree.

Every effort is made to place persons who have been mentally ill; suffer from epilepsy, etc. Two young sub-normal men have been placed in hotel work and as they have not been able to keep employment before, this experiment is considered very successful.

Through the auspices of the National Society for Spastics, two young Wallasey spastic girls were trained in tic-o-press machine operating and are now employed and financially independent. Further applications are receiving consideration.

*The Wallasey Remploi Factory* continues to employ the full quota of 60 and the production has recently been changed from industrial gloves to candlewick articles—bedspreads, dressing gowns, etc.

*The Anne Glassey Workshop* receives an annual grant from the Welfare Department and provides permanent employment for six persons recovered from Tuberculosis in addition to the courses of rehabilitation for other patients. Their products of machine knitted garments, Christmas Cards and Crackers etc., are well known in the area.

*The Sir Robert Jones Workshop, Liverpool*, employs one Wallasey male epileptic as a poster compositor.



At the 31st December, 1961, there were eight persons classified as unlikely to obtain employment in other than under sheltered conditions; this figure excludes men and women who are still in receipt of Sickness Benefit.

### **Voluntary Organisations for the Handicapped**

The Liverpool Adult Deaf and Dumb Benevolent Society and the Catholic Deaf Society of St. Vincent de Paul receive a per capita grant from the Wallasey Council in respect of 59 Wallasey deaf residents. The Social Centres at Princes Way, Liverpool, and Ashville Road, Birkenhead, are well attended by deaf people from Wallasey.

The Wallasey Hard of Hearing Club is now in its twelfth year and the 30 members now meet each Thursday evening at the Welfare Centre for Handicapped. Outings and social events are organised and many members attend the short courses for the Hard of Hearing at Burton Manor. Holidays are arranged for groups of members who have met and made friends at the Club.

The Wallasey Spastic Association continue to meet at the Welfare Centre, Penkett Road, three evenings a week, when handicraft classes are held for younger and adult spastics, the cost of tuition being subsidised by the Local Authority Education Committee. The Association has purchased a new ambulance sitting-car which is used at all times. Holidays were subsidised for spastics during the summer, and outings and social events are arranged for the members and their families.

The Welfare Department co-operates with the organisation of the Wirral Invalid Tricycle Association and their weekly social meetings are held at the Welfare Centre. Motor coach outings and tricycle runs are successfully organised, and the annual Dinner and Entertainment was attended by 100 disabled and Civic Heads of the Wallasey Council. The Wirral I.T.A. receive an annual invitation from Cadbury's Ltd., and Cammell Laird, Ltd., to an entertainment which is specially arranged by both firms for their members.

The Rotary Club, Wallasey, and St. John's Ambulance Brigade help at all times with transport and the Rotary Silver Trophy was again presented to a member of the association.

The Women's Voluntary Service also provide transport when requested on behalf of disabled persons, and their Meals-on-Wheels service is beneficial to many handicapped housebound people. The Craft Class at Moreton also receive the meals each Wednesday.

The Clothing Service given by the W.V.S. is called upon frequently.

The Welfare Department is represented on the following Committees:—

The Liverpool Adult Deaf and Dumb Society.

The Catholic Deaf Society of St. Vincent de Paul.

The Liverpool Council of Social Service.

The Wallasey Disablement Advisory Committee (Ministry of Labour).

The Wallasey Spastic Association.

The Wirral Invalid Tricycle Association.



**Statistics of Registration***Registers of Handicapped Persons :—*

			Under 16 years	16—64 years	65 years and over
General Classes	...	M.	4	563	43
		F.	4	205	11
Deaf without speech		M.	—	28	4
		F.	—	17	3
Deaf with speech	...	M.	—	3	1
		F.	—	6	1
Hard of Hearing	...	M.	—	12	6
		F.	—	11	4
			Total	...	926

Included in above figures are :—

			Employed	Unemployed	In Homes	Total
Spastics	...	M.	4	3	1	21
		F.	5	7	1	
Epileptics	...	M.	14	5	4	37
		F.	8	1	5	

COUNTY BOROUGH OF WALLASEY  
EDUCATION COMMITTEE



# Report

OF THE

Principal School Medical Officer  
For the Year 1961

E. SHAW & CO. LTD.  
1962





## STAFF

### **Medical Officer of Health and Principal School Medical Officer:**

Dr. H. W. HALL, M.B., Ch.B., D.P.H.

### **Deputy Medical Officer of Health and Deputy Principal School Medical Officer:**

Dr. W. F. CHRISTIAN, M.B., Ch.B., D.P.H.

### **Assistant Medical Officers of Health and School Medical Officers:**

Dr. E. J. O'REILLY, M.B., Ch.B., B.A.O.

Dr. ESME I. GRANT, M.R.C.S., L.R.C.P.

### **Principal School Dental Officer:**

Mr. C. J. LUYA, L.D.S.

### **School Dental Officers:**

Mr. W. A. HENDERSON, L.D.S.

Mr. E. G. MASON, L.D.S.

Mr. T. H. MOULDS, L.D.S.

### **Dental Surgery Assistants:**

Mrs. E. M. BROWNE.

Miss P. BERGIN.

Mrs. U. BROWN.

Mrs. A. HENDER.

### **Superintendent Health Visitor/School Nurse:**

Mrs. K. SCHOFIELD, S.R.N., S.C.M., H.V. Certificate.

### **Health Visitors/School Nurses:**

Miss A. J. EDGE, S.R.N., S.C.M., H.V. Certificate.

Miss C. E. MURRELL, S.R.N., S.C.M., H.V. Certificate.

Mrs. E. E. P. NOLAN, S.R.N., S.C.M., H.V. Certificate.

Mrs. W. DOVEY, S.R.N., S.C.M., H.V. Certificate.

Miss M. E. ASPINALL, S.R.N., S.C.M., H.V. Certificate.

Miss E. M. MORGAN, S.R.N., S.C.M., H.V. Certificate.

Miss E. WHITBURN, S.R.N., S.C.M., H.V. Certificate.

Miss K. E. HIGGINS, S.R.N., S.C.M. (Part 1), H.V. Certificate.

Mrs. M. KEANE, S.R.N., S.C.M., H.V. Certificate.

Mrs. I. D. WINTERBURN, S.R.N., S.C.M. (Part 1), H.V. Certificate.  
(Part-time).

Mrs. M. E. GALLIMORE, S.R.N., S.C.M. (Part-time).

Mrs. E. SIMPSON, S.R.N., S.C.M. (Part 1), H.V. Certificate.

Mrs. M. J. GRIFFITHS, S.R.N., S.C.M., H.V. Certificate.

(Appointed 6-2-61). (Part-time).

Miss A. DOYLE, S.R.C.N., S.C.M., H.V. Certificate.

(Appointed 1-6-61).

### **Visiting Specialists:**

Mr. J. D. ELLIOT EDWARDS, M.B., Ch.B., D.O.M.S.

(Ophthalmic Specialist).

Mr. H. DAVIES, M.B., F.R.C.S. (Eng.), Ch.B., Ch.M. (Ortho.).

(Orthopaedic Specialist).

Dr. G. EGAN, M.D., Ch.B., D.P.M. (Psychiatrist).

### **Physiotherapists:**

Mr. K. JONES, M.C.S.P.

Mrs. KERR, M.C.S.P.

### **Speech Therapist:**

Mrs. M. B. AVISON, L.C.S.T.

### **Educational Psychologist:**

Mr. J. MAGINN, B.A. (Hons.), Dip. Education, Dip. Ed. Psychology.

### **Social Worker:**

Mrs. U. BARRETT-LENNARD, Diploma in Social Science.

### **Administrative Staff:**

Mr. S. D. LAWSON.

Mrs. M. FRANCE.

Mrs. B. RADCLIFFE.

Mrs. B. H. MAUNDER (Part-time).

Mrs. E. E. HILL (Part-time).



Town Hall,

Wallasey.

May, 1962.

To: *The Chairman and Members of the Education Committee.*

Ladies and Gentlemen,

I have pleasure in submitting my Report on the School Health Service for the year 1961.

The service was maintained throughout the year on similar lines as in the previous year. I am pleased to say that the health of Wallasey school children is good, but I regret to have to report that the state of their teeth leaves much to be desired. A further campaign to improve oral hygiene was launched in collaboration with the Local Dental Committee during the autumn. A further meeting with representatives of the Local Dental Committee will be held to attempt to assess the results of the campaign.

During the month of July, members of the School Health Service visited the secondary schools, gave talks and showed a film pointing out the danger to health of cigarette smoking particularly in relation to lung cancer.

The Report, as is the usual custom, contains separate contributions from various members of the School Health Staff and some of the Staff of the Education Department. It is, therefore, unnecessary for me to make any further comments.

Finally, I should like to thank the Director of Education and his Staff for their co-operation and also members of the Education Committee for their continued support in all matters affecting the School Health Service.

I am,

Your obedient Servant,

HOWARD W. HALL,

Principal School Medical Officer.



## ANNUAL REPORT—SCHOOL HEALTH SERVICE, 1961.

### Observations of Dr. Christian, Deputy Principal School Medical Officer:—

The number of Periodic Medical Inspections carried out during the year was as follows:—

Entrants	Leavers	Others
1,006	1,653	1,587

Special Inspections (which include cases seen at school at the request of the staff or school nurse and cases seen for the first time by the school medical officers at the clinics) numbered 1,268 during the year.

Reinspections (children noted at previous periodic inspection as suffering from some defect or disability which required periodic review) numbered 230 during the year.

The General Condition of pupils examined at routine inspections was as follows:—

	Number	Percentage
Satisfactory ...	4,226	99.53
Unsatisfactory ...	20	.47

Elleray Park Day Special School for Physically Handicapped children was visited monthly by Dr. O'Reilly.

Clare Mount Day Special School for E.S.N. children was visited monthly by Dr. Christian.

The children on the registers of these two day special schools are medically examined prior to their transfer to these schools and regularly (approximately once a year) as long as they remain there. This closer medical supervision of the handicapped children is necessary to ensure that the measures prescribed to mitigate or alleviate the handicaps are being conscientiously adopted, by the parents, as for example, the wearing of hearing aids for deafness, the attendance at the clinic or hospital for treatment for discharging ears or for the provision or repair of spectacles, and regular physiotherapy when the muscles of the limbs are affected by cerebral palsy or poliomyelitis.

### Audiometry

Dr. O'Reilly, School Medical Officer, attended a refresher course at the Department for the Deaf, Manchester University, which dealt with modern methods of ascertaining deafness in childhood including

the use of modern portable sweepstest audiometers. One of these machines was purchased during the year and this has enabled testing to be carried out on children in the Infant schools. Dr. O'Reilly is not able to devote more than two sessions per week—on average—to this work, and so the testing has had to be limited, in the ordinary schools, to those children who are considered, by the staff to be falling behind in their school work. All children on the rolls of the day special schools are tested, however, as deafness is more frequently present as an additional handicap among both physically handicapped (spastic) children and mentally backward children. Further details about this work will be found in Dr. O'Reilly's report.

### **School Meals Staff**

From the beginning of the Autumn Term all personnel engaged in the school meals service were medically examined by the medical staff of the Department, as required by a resolution of Council. In addition, arrangements were made for the mobile mass X-ray unit to visit Wallasey on 25th and 26th September so that all school meals personnel could also be X-rayed with the minimum of inconvenience to themselves. It is pleasing to report that no cases of active tuberculosis were found amongst the 272 people X-rayed. Thirteen people were recalled for further investigation, but the abnormalities revealed by the larger X-ray films were not significant. Only one person was excluded from working in the school meals service as a result of the medical examinations which were carried out.

### **Medical Examination of Teachers and Intending Teachers**

The medical staff of the Department carry out these examinations at the school clinics in the town. The table on Page XXI of the report shows the number of candidates examined in the year.

### **Eneuresis**

In view of the favourable reports that have been made in the last few years as to the effectiveness of electric, battery operated, bed wetting outfits for the treatment of bedwetting, and in view of the ineffectiveness of other conventional methods of treatment, it was decided to purchase three outfits during the year. A note on the results obtained will be found in Dr. O'Reilly's report. Of necessity the treatment of each case lasts several months, and so only a few cases have, so far, been supplied with these outfits.

### **Smoking and Lung Cancer**

It is said that the tobacco firms spent £7.7 million in 1960 on press and television publicity. Faced with publicity of this magnitude, any countermeasures adopted by individual local authorities cannot be expected to yield very great rewards. In Edinburgh, the Health Committee spent £4,350 on telling the public about the dangers of cigarette smoking. A team from the University Department of Public Health and Social Medicine then



interviewed a random sample of the population. Threequarters of them confessed that, although they knew about the campaign, they were still smoking as much as before. Neither was the campaign successful in convincing more people that smoking may cause cancer. In Hertfordshire a concentrated health education programme in one school did not alter the smoking habits of school children as compared with another school which was used as a control. However, the secondary and grammar schools in Wallasey were visited in June and July and were shown a B.B.C. Film which stated the known facts concerning the relationship between smoking and lung cancer. The number of questions asked after the film had been shown indicated that the children had been impressed by what they had seen and heard. Whether, however, the impression will last and result in a cessation or reduction in smoking is another matter.

### **Prevention of Tuberculosis**

As in previous years, all children between the ages of 13 years and 14 years, and any older children who had not previously been vaccinated, were offered vaccination against tuberculosis (B.C.G. vaccination). Prior to vaccination all the children were given a skin test to see whether they had been in contact with any tuberculous persons, and only those who gave a negative reaction to the skin test were vaccinated. A pupil of one school developed active tuberculosis during the summer holidays and was admitted to hospital. She had not been vaccinated, but would have been eligible for vaccination on her return to school after the summer holidays. Arrangements were made for the skin testing of the children in her age group to be carried out at school early in the September term, and, as a result, eighteen children were found with positive reactions to the skin test. These children, together with all their close contacts, were referred to the Chest Clinic for X-ray. As a result, of the eighteen children referred, sixteen children were found to have old healed lesions of the lungs, and two had active disease. The latter children were put on treatment. In addition, all home contacts of the Mantoux positive children, forty-seven in all, were called up to the Chest Clinic for investigation to exclude tuberculosis. None of these home contacts showed any evidence of tuberculosis. The teachers of the school were also X-rayed, but no source of infection came to light as a result of these X-rays. Further investigation of the original case has suggested that her infection was of long standing and was not contracted at her present school. If this child had not fallen ill when she did, but had returned to school in September, she would certainly have been picked out by the Mantoux testing of her age group, as also would her close contacts, and been referred for treatment to the Chest Clinic. The table showing the number of children vaccinated during the year is on Page XXI of the report.

### **Immunisation**

Immunisation clinics are held at Merton Road Clinic between



2 p.m. and 4 p.m. on the first and third Wednesday of each month, and at the Moreton Clinic at the same times on the second and fourth Friday of each month. Pre-school and school children are immunised at these Clinics without any appointments being necessary. Vaccines are available to provide protection against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis. Because of the publicity given to poliomyelitis by the local press, followed shortly afterwards by an outbreak of poliomyelitis in Liverpool, a large demand developed for immunisation which kept the clinic staffs very busy for a time. The number of children immunised during 1961 will be found on Page XXI of the report.

### **Minor Ailments—Consultation Clinics**

Minor Ailments Clinics are held at each of the school clinics as follows :—

Merton Road Clinic—Monday, Wednesday and Thursday mornings.

Water Street Clinic—Monday, Wednesday and Friday mornings.

Moreton Clinic—Monday to Friday mornings.

A doctor is in attendance at Merton Road Clinic each Wednesday morning, at Water Street Clinic each Monday morning and at Moreton Clinic each Tuesday morning. A variety of minor ailments, such as infected ears, infected eyes, impetigo, cuts, burns and warts are treated at these clinics, whilst at the doctors' sessions, medical and psychological problems, as distinct from minor ailments, can be investigated and the appropriate advice or treatment given.

Special sessions are devoted to the examination of children for out of school employment and entertainment, and the numbers seen are included in the Special Inspections Table at the end of the report.

### **Ophthalmic Clinic**

A visiting Ophthalmologist, Mr. Elliott Edwards, investigates ocular defects of children referred by the school medical officers and, where appropriate, prescribes spectacles. Children attend these clinics by appointment only. As will be seen from the table on Page XXIX, 1,232 children were found to have errors of refraction during the year, and spectacles were prescribed for 822 children.

### **Plantar Warts**

As reported in previous Annual Reports, our investigations suggest that the majority of these foot infections are contracted at

the Guinea Gap Baths. We are still treating a large number at the school clinics, either by wart paste and plaster or by carbon dioxide snow followed by paste and plaster. There has been a welcome drop this year in the number of warts found to need treatment and the number of warts treated as will be seen from the tables on Page XXXI. We are going to carry out a further enquiry in 1962 into the history of children who developed plantar warts during 1961 to see whether there is still a preponderance of children attending the Guinea Gap baths as compared with the number who had practised barefoot P.T. and dancing or used other children's plimsolls. I understand the staff of the Guinea Gap baths are now treating all floor surfaces with a solution of Vanodine, which has proved itself capable of killing fungal infections efficiently. The fall in the incidence of plantar warts, as revealed by the statistics this year, may be in part attributable to its use. It will be easier to decide whether this is so when the enquiry, previously mentioned, has been completed.

Finally I would like to thank the headteachers for their co-operation with this department on all matters appertaining to the school health service.

**Dr. O'Reilly, School Medical Officer, submits the following observations:—**

One of the very serious handicaps still prevalent among school children is deafness. To discover the cases of this defect, in order to secure prompt treatment, we have been using an audiometer for the last thirteen years. Early this year the Education Committee purchased a modern pure tone audiometer. This came into use in March. It replaces the old gramophone type of instrument, which served so well, but has now gone out of fashion.

The new machine can be used on only one child at a time, so testing has had to be confined to children whom teachers or parents suspect of deafness, and to those who have had either defects or illnesses likely to damage their hearing.

We began using the new audiometer in the junior schools. This was the practice with the previous one which could not be used by the very young. However, the course at Professor Ewing's Department of the Deaf at Manchester University, which the Committee allowed me to attend, led to several changes in our methods. The most important one was that we should concentrate on the younger children. It is among these that prevention, cure or alleviation are most likely to succeed.

Of the hundreds of selected children tested during the year, just 3% were found to have defects needing surgical attention. These were referred to the Ear, Nose and Throat Department of the Victoria Central Hospital, by arrangement with the Surgeons, and with the consent of their family doctors. Unfortunately, almost



a third of them have defects which are irremediable, and they will have to rely on hearing aids.

Nocturnal enuresis is another, and even more widespread, problem than deafness. It has always evaded a satisfactory solution. This year a method was tried for which success was widely claimed. It is a device which is placed in the bed and which causes an electric bell to ring when enuresis occurs. The idea was that the parents should get to know at what hour the nightly accident happened, and, from then on, should rouse the victim in time to prevent it. Some believed we could expect a cure because the boy would eventually form a habit of anticipating the catastrophe by awaking and attending to himself. (The great majority are boys).

The apparatus has been tried on seven children. The number is so small because it has had to be left with each for such a long time, usually more than four months, and, even then, there were relapses.

Opinions vary on how it should be appraised. It is certainly not a complete answer, if only because it can help so very few of the several hundreds who need help. It seems to me to draw too much attention to a matter of which the boy is already ashamed. It thus undermines still further his security and confidence in himself. It is, fundamentally, this lack of self-confidence which causes him to regress subconsciously to the infant state, where accidents evoke pity and protection.

However, the machine has a place in the treatment of this troublesome condition, especially in those cases where the cause is the depth of sleep. We shall continue to use it in selected cases.

**Dr. Grant, School Medical Officer, submits the following observations:—**

The general work of the School Health Service remains unchanged, and the periodic school medical inspections still reveal defects which are not having the necessary treatment. Some of these defects are either unknown to the parents, or, if known, are not being treated, and, as long as this state of affairs exists, then the School Health Service will continue to pay a dividend and contribute to the positive health of the community.

Some of the more chronic infectious and contagious conditions are decreasing—e.g. otorrhoea, impetigo, scabies and ringworm, but virus infections of the feet, in the form of verrucae, are still prevalent.

Fat children now usually out-number the under-nourished, and one frequently has to give advice on more suitable and better-balanced diets—advice which is not often taken I regret to say!



Chronic upper respiratory catarrh still figures largely as a cause of absenteeism, and it is difficult to know how to prevent this. Better ventilation in the classrooms, and at home, better balanced meals, extra vitamins, nasal hygiene and a course of artificial sunlight and breathing exercises are all useful prophylactic measures. Fewer children have their tonsils and adenoids removed these days, although when this operation has been performed on selected cases considerable improvement in general health usually obtains.

Orthopaedic defects, usually associated with feet and posture are still frequently found, and to a large extent these are due to the unsuitable ill-fitting footwear which continues to be worn at all ages. One is fighting a losing battle when talking to parent or teenager about the style of shoe that should be worn; the mother would *like* her daughter to wear a "sensible" shoe but the child thinks otherwise, and she usually wins.

The condition known as "hallux valgus" in which the big toe deviates further and further outwards from the mid-line is one of the commonest of the really crippling deformities of the foot, and although it may arise as the result of a congenital tendency, it rarely progresses to any serious deformity unless it is aggravated by ill-fitting and unsuitable footwear while the foot is growing. Special care should therefore be taken with regard to both shoes and socks in children whose feet show any tendency to develop this deformity. I have recently interviewed the representative of a well-known shoe manufacturer and the proprietor of a local shoe shop and I was agreeably surprised to find that both were in entire sympathy with this national problem and very anxious to help. I was shown a wide range of very good-looking sensible and suitable shoes and I feel therefore that it is up to the parent to *insist* that such shoes are worn. The representative of the shoe manufacturers expressed his complete willingness to give a talk on the value of good shoes and the danger of bad ones, to schools, parent-teacher associations and similar bodies of interested persons, and I have made a strong recommendation that his offer be accepted; even if 10% of parents and children are converted this would be a valuable contribution to the welfare of the future feet of the nation.

Every effort is being made to discover, as early as possible, any impairment of hearing because it is only by such early diagnosis that suitable provision of medical and educational services can be instituted with the best prospect of success. There is widespread appreciation of the need to test children "at risk" and it should become increasingly rare for a deaf child to escape detection before the age of school entry. The Health Visitors have been instructed to test the hearing of all babies and toddlers who are "at risk" and any doubtful cases are referred to the School Medical Officers.

The mental health of children continues to be studied in its many aspects, the emphasis being on the prevention of ill-health, and if necessary the earlier referral of disturbed and emotionally maladjusted children to the Child Guidance Clinic.

Some authorities have introduced a more selective approach to the medical supervision of school children and, instead of the systematic "periodic" examination, more frequent attention is being given to the individual child who is brought to the notice of the School Medical Officers by the teacher, health visitor, physical educationalist or parent. This method has the advantage that the school health service could concentrate much more on those children whose health and attendance at school was not satisfactory, but there still remains the possibility that some "silent" defect might be missed in those who were not periodically and systematically examined.

We value the presence of the parents at medical inspection and it is regrettable that so many of the school leavers are telling their mothers not to attend—this is just another example of the growing independence of the teenager, and one to be deplored, because there is much to be learned from the parent when present.

A recent addition to our routine work has been the medical examination of the School Meals Staff, in order to ascertain their suitability for this important work. These examinations, together with those of candidates for Teachers' Training Colleges take up an increasing amount of our time, and it is becoming quite difficult to fit them into our already busy time-tables.

I should again like to take this opportunity of thanking the headteachers for the hospitality accorded to me when I visit their schools, and for their co-operation.

### **Report of Mr. H. Davies, Consultant Orthopaedic Surgeon, on the School Orthopaedic Clinics held at Liscard and Moreton in 1961:—**

The school orthopaedic clinic held weekly at the Merton Road clinic and on every fourth Thursday at Oakenholt Road, Moreton, has begun to show a change in the clinical picture. I am happy to report that there were no serious affections such as osteomyelitis or tuberculosis, which is a reflection of the general overall trend in the country, but we had four new cases of cerebral palsy.

The pattern of our work has been, in the main, the treatment of the acquired deformities of bones for which so much can be done if advice is sought in the early stages. Flat foot is still one of our major problems at all ages. Footwear worn by the children still leaves much to be desired from an ideal orthopaedic viewpoint and, I should appreciate the co-operation of all teachers in the borough in this matter. Parents, too, can help by bringing the children regularly for physiotherapy and by encouraging regular exercises at home, as our number of discharges show that the right treatment can be effective.



We have a new danger of even greater significance with an increase in the number of knock knees in the pre-school children, both sexes being equally affected. This seems puzzling, as nutrition today seems adequate, and therefore one can exclude the older condition of rickets as a cause. I should like to suggest that in spite of the abundance of food available, toddlers may not be having an adequate milk intake to supply the amount of calcium they need for growing bones. Their carbohydrate intake, however, could be excessive, causing their weight to be too great, with corresponding mechanical strain on their legs. These theories of the aetiology of the present increase in knock knees need more investigation, but we have taken effective measures to deal with this condition by the recommendation of the use of boots for toddlers. During this year we have had the co-operation of a local boot and shoe retailer for the provision of good fitting boots for toddlers. This has proved most beneficial and has been much appreciated by the parents.

I wish to thank all the staff who work so ably and willingly with me at these clinics and to commend the physiotherapists whose hard work and co-operation are reflected in the number of discharges.

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### PHYSIOTHERAPY REPORT, 1961.

Total Cases on Register ... ..	3098
Total Attendances ... ..	7041
New Cases on Register ... ..	416
Orthopaedic Cases of School Age treated ... ..	1423
Number of Orthopaedic Abnormalities treated in School	20
New Orthopaedic Cases of School Age ... ..	202
Number of Orthopaedic Cases of School Age discharged	181

### ARTIFICIAL SUNLIGHT REPORT.

New Cases ... ..	68
Number of Cases on Register ... ..	83
Discharged,—Cured ... ..	17
Improved ... ..	18
No change ... ..	—
Left School ... ..	3
Admitted to Hospital ... ..	1
Defaulters ... ..	36



**The following observations are submitted by Mr. K. Jones, Physiotherapist:—**

The number of cases referred for physiotherapy shows a decrease over the last twelve months. This has resulted in more patients receiving individual attention. Such patients have been chosen selectively, so that, where possible, cases of asthma have been treated on their own, at least in the initial stages. Poor posture in older patients, where re-training of habit patterns is important, has also benefited from individual attention.

Pes Valgus (flat feet) remains the most intractible problem, and in treating these cases with exercises, one can only aim at preventing trouble in later life. Girls from the High Schools are now allowed to attend remedial exercises for Pes Valgus at school, under the supervision of P.E. teachers. This has been done at the request of the head teachers, in order to obviate the girls' missing lessons. One hopes that the exercise sessions are held regularly.

Cerebral Palsy continues to be treated by Bobath methods. The importance of correct treatment is illustrated by the young patient, a severely handicapped spastic double hemiplegia, who, after being treated at these clinics for several years had reached the crawling stage. His mother then removed him from our care, and he continued to receive treatment (non-specialised) at another clinic, under a different authority. In twelve months, the mother returned with the request that the child, once more be treated at Wallasey Clinics, as his condition had regressed. Crawling patterns had been lost, and deformities of the hips and knees were developing. Needless to say, it will take longer than twelve months to regain lost ground. Abysmal ignorance reigns supreme in this field of endeavour.

# PHYSIOTHERAPY REPORT, 1961

	Visiting Orthopaedic Surgeon's Clinic			Artificial Sunlight Clinic		Breathing Exs. for post-operative Tonsillectomy and Adenoidectomy		Asthma		Remedial Exercises	
	New Pts.	Total Atts.	Disch.	New	No. Trts.	New	No. Trts.	New	No. Trts.	New	No. Trts.
January ... ..	10	86	20	6	278	—	—	—	—	9	153
February ... ..	16	107	20	9	321	12	42	—	21	11	330
March ... ..	33	113	19	9	424	25	79	—	23	22	301
April ... ..	16	70	2	4	295	10	30	1	8	8	169
May ... ..	1	82	15	8	411	20	64	—	17	5	356
June ... ..	32	157	17	9	387	—	—	2	14	13	435
July ... ..	18	74	10	2	176	—	—	—	4	5	255
August ... ..	15	73	14	—	—	—	—	—	—	4	—
September ... ..	13	114	20	4	294	—	—	1	—	7	298
October ... ..	16	123	29	15	230	3	8	6	18	31	296
November... ..	38	118	25	2	325	7	32	1	29	19	360
December ... ..	9	87	16	—	260	15	51	1	37	6	230
TOTALS ... ..	217	1,204	207	68	3,401	92	306	12	171	140	3,183

REPORT of Mr. HORACE DAVIES, Orthopaedic Surgeon

Number of Sessions held at the Authority's Clinics	...	47
Number of New Cases	... ..	294
Number of Re-examinations	... ..	947
Number of Cases discharged cured	... ..	216

	Disease Categories	New Cases				Re-examinations				Discharged				
		Pre-Sch Age		School Age		Pre-Sch Age		School Age		Cured	Relieved	Left	Treatment Refused	Died
		M.	F.	M.	F.	M.	F.	M.	F.					
Congenital Deformities	Trunk ...	—	—	1	—	—	2	3	1	—	—	—	—	—
	Upper Limb ...	1	—	—	2	3	2	—	5	1	—	—	—	—
	Lower Limb ...	2	—	—	1	3	3	2	5	3	—	—	—	—
Acquired Deformities	Flat Foot ...	10	17	56	68	25	18	191	216	123	—	—	1	—
	Hallux Valgus ...	—	1	—	1	—	—	—	20	—	—	—	—	—
	Postural Kyphosis and Scoliosis ...	1	—	2	1	1	3	9	8	4	—	1	—	—
	Knock Knee ...	25	25	11	11	100	80	50	37	49	—	—	—	—
	Bow Leg ...	5	3	1	—	3	4	8	—	1	—	1	—	—
	Other Conditions ...	7	3	7	17	10	6	41	44	26	—	—	—	—
Affections of Skeleton	Rickets ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Conditions ...	—	—	—	—	—	1	—	—	1	—	—	—	—
Affections of Nervous System	Spastic Paralysis ...	—	1	1	2	3	4	10	11	1	—	—	—	—
	Infantile Paralysis ...	—	—	—	—	—	—	—	2	—	—	—	—	—
	{ Peripheral ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Nerve Lesions ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Affections of Bones	Osteomyelitis T.B. ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Conditions ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Affections of Joints	T.B. ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Non-T.B. ...	—	—	—	—	—	—	1	—	1	—	—	—	—
Affections of Spine	T.B.... ...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Non-T.B. ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Affections of Epiphysis		—	—	1	—	—	—	4	—	1	—	—	—	—
Affections of soft tissues		1	—	1	1	—	—	1	1	—	—	—	—	—
Complications of Trauma		—	—	4	1	—	—	2	2	2	—	—	—	—
Cases referred to Clinic and found normal		—	—	2	—	—	—	—	1	3	—	—	—	—



## OPHTHALMIC CLINICS, 1961.

### **Remarks of Mr. J. E. Edwards, Ophthalmic Specialist:—**

1961 has seen the introduction of the new National Health Service Regulations whereby school children over the age of ten can obtain more attractive spectacle frames while the National Health Service continues to provide free lenses. Previously the whole cost of these spectacles was borne by the parents and as the free spectacles have little appeal to older children there is now an inducement to these children to wear their glasses.

In the latter half of the year cyclopentolate hydrochloride (1% Mydrilate) has been used as a cycloplegic drug in straightforward refraction cases. This has an advantage over Homatropine in that only one application is necessary, and full cycloplegia is within half an hour. Atropine ointment continues to be used for the younger children and for those with Strabismus.

## CHILD GUIDANCE CLINIC, 1961.

### **Dr. G. Egan, Consultant Psychiatrist, makes the following observations:—**

The statistical pattern for the current year is very similar to the pattern of previous years. The new case referral rate has dropped from 86 in 1960 to 74 in 1961. The referral rate, however, over the past four years has not really shown any significant variation. The isolated increase for the year 1960 made us feel that we were perhaps tapping a new source, but this is not borne out by this year's figures. It would appear, therefore, that the incidence of maladjustment amongst the schoolchild population in the Borough of Wallasey is in fact a low one compared with other parts of the country. This is, of course, gratifying, and the reason for it, although still obscure, must lie in the fact that this is a small and stable borough where there is a healthy dilution of maladjustment by the preponderance of stable stock, the latter setting the standard. There are, furthermore, exceptional educational facilities in that school accommodation is adequate and grammar school facilities proportionate to the needs of the total schoolchild population. Apart from the Education Committee Child Guidance facilities, there is a Child Psychiatric Clinic held twice a week under the auspices of the Regional Hospital Board, but I understand from my colleague, Dr. Zausmer, who runs this clinic, that his referral rate is also conspicuously low. The mental health of the schoolchild population in Wallasey would therefore appear to be adequately catered for, and there does not appear to be any immediate need for the expansion of this service.

As Mr. Maginn points out, the caseload of 74 shown in this statistical table does not by any means represent the total work

done for the Education Committee by the Child Guidance Clinic staff. Remedial coaching has, quite rightly, expanded three-fold, and, there is probably a further need of expansion for this particular service. Mr. Maginn's work in assessing and advising on various educational problems is very extensive, as is also Mrs. Barrett-Lennard's work on the welfare side.

During the current year, we have initiated a series of seminars at the Child Guidance Clinic here for Health Visitors, School Nurses and, other interested personnel. These have been very fully attended, and the interest shown in the seminars has been very gratifying for the clinic staff.

## **WORK OF THE SCHOOLS' PSYCHOLOGICAL SERVICE, 1961.**

### **Observations of Mr. Maginn, Educational Psychologist:—**

The testing, diagnosis and treatment of children requiring psychiatric help has covered a wide range of disorders at a continued high rate of success. These cases are, of course, heavily outnumbered by those whose problems are primarily educational or social, in which our role contributes to mental health in a preventive rather than a clinical sense. Success in all aspects of our work involves relationships as well as techniques, and is due in large measure to the co-operation of the schools. Parents are becoming increasingly aware of our functions and, are ready to accept our advice and help.

An analysis of the work of the Clinic is made below :—

### **Cases referred.**

Current cases, January 1st, 1961	...	...	...	...	31
To be reviewed	...	...	...	...	7
New Cases, 1961	...	...	...	...	74
					112

The new cases were referred from the following sources, through either the Director of Education or the Principal School Medical Officer :

Head Teachers	...	...	...	...	37
Deputy and Assistant S.M.O.	...	...	...	...	19
Parent	...	...	...	...	12
Educational Clinic	...	...	...	...	2
Juvenile Court	...	...	...	...	2
Probation Officer	...	...	...	...	0
Family Doctor	...	...	...	...	1
Children's Officer	...	...	...	...	1
					74





**Psychologist:**

Test interviews	...	...	...	...	...	...	76
Parent interviews	...	...	...	...	...	...	52
Remedial Treatment interviews	...	...	...	...	...	...	45
School visits and reports	...	...	...	...	...	...	110
							<hr/> 283 <hr/>

**Social Worker:**

	<i>School Welfare</i>		<i>Clinic</i>
	<i>Cases</i>		<i>Cases</i>
Home visits	...	...	...
Clinic interviews	...	...	...
School inquiries	...	...	...
Consultation with other agencies	...	...	...
<hr/> 267			<hr/> 1975 <hr/>

Of the total number of psychologist's interviews, those above constitute about one-third. The remainder were concerned, with educational problems, including individual assessments for educational advice, ascertainment for special educational treatment, and the provision of remedial coaching for suitable cases. Other activities during the year have included participation in the N.F.E.R. National Survey of Health and Development and a University survey of school phobia, assistance in Secondary classification and in the selection of Pre-nursing candidates, and a survey of Junior school-children's abilities which is still in progress.

The activities of the social worker, Mrs. Barrett-Lennard, have been as varied, as in previous years. Regular contact and support have been maintained with families of closed as well as current Child Guidance, Educational and Social Welfare cases. She has attended professional and Merseyside Marriage Guidance Council meetings. P.T.A.'s, and Brains Trusts, has given talks to Young Wives and Youth Organisations, has made a survey of school uniform costs, and has contributed to seminars and conferences.

The work of our remedial teacher, Miss Pilkington, has now been extended to two new centres, and the number of children selected for remedial help has been increased three-fold.

**SPEECH THERAPY, 1961.**

**Mrs. Avison, Speech Therapist, submits the following observations:**

This year has seen an all round increase in the Speech Therapy figures. Group treatment has been adopted whenever suitable to cope with the ever increasing number of patients referred for treatment.

Group treatment for stammerers of the same age has always been the practice at Moreton. Now, children requiring treatment

for the same faulty sound pattern are treated together whenever possible. It has been impossible to interview new cases during the Moreton weekly session, so an extra half day per month has been set aside for this purpose. After the initial interview most Moreton children have to be placed on supervision until a regular appointment is available. A great demand exists for more sessions at Moreton but my Rota forbids the time. An extra Speech Therapist, here, whole or part-time, appears to be a necessity.

It is a great shame that more time is not allowed for visiting schools and discussing cases and methods of treatment. Teachers, Health Visitors, in fact everyone concerned in child welfare have shown an increasing interest in the problem of speech defective children. A more co-operative and congenial atmosphere would be hard to find anywhere.

### **SPEECH THERAPY STATISTICS, 1961.**

Total number of attendances	...	...	...	...	1,750
Number of patients receiving regular treatment during the year	...	...	...	...	103
Number of patients receiving treatment at intervals during the year	...	...	...	...	135
Number of patients admitted	...	...	...	...	73
Number of patients discharged	...	...	...	...	68

#### **Classification of Patients Admitted:**

Dyslalia (defect of articulation)	...	...	...	...	36
Stammer	...	...	...	...	29
Interdental Sigmatism (defective articulation of "s" and "z")	...	...	...	...	5
Lateral Sigmatism (defective articulation of "s" and "z")	...	...	...	...	2
Dysarthria	...	...	...	...	1
					—
					73
					—

#### **Classification of Patients Discharged:**

Cured	...	...	...	...	...	51
Unco-operative	...	...	...	...	...	5
Left School	...	...	...	...	...	9
Left District	...	...	...	...	...	3
						—
						68
						—

#### **Classification of Waiting List:**

Not yet interviewed	...	...	...	...	...	23
Interviewed and placed on Supervision	...	...				36
Interviewed, and awaiting regular appointment	...					34
						—
						93
						—

**MEDICAL EXAMINATION OF TEACHERS OR INTENDING****TEACHERS.**—Min. of Education Circ. 249 of 1952.

Total Number Examined

Teachers				Intending Teachers			
Male	...	...	6	Male	...	...	28
Female	...	...	4	Female	...	...	55
Total			10	Total			83

**IMMUNISATION****Diphtheria**

Schoolchildren given:		Primary Immunisation	...	258
		Reinforcing injections	...	819
Total				1,077

**Poliomyelitis**

Age Range: Born between 1945-1956—				
Received Primary Immunisation		...	...	1,054
Received Reinforcing Injections		...	...	8,468
Total				9,522

**PRIMARY MANTOUX TESTS AND VACCINATIONS, 1961.**

No. of children offered (per parents) B.C.G. Vaccination		...	...	1,651
No. of children accepting (per parents) B.C.G. Vaccination		...	...	1,212
Percentage of Parents accepting Vaccination		...	...	73%
No. of children Mantoux tested		...	...	1,110
No. of children found Mantoux Positive		...	...	80
Percentage of children Mantoux Positive		...	...	7.2%
No. of children found Mantoux negative		...	...	1,030
No. of children vaccinated, with B.C.G. Vaccine		...	...	1,029

**EXAMINATIONS OF CHILDREN FOR EMPLOYMENT, ENTERTAINMENT, HOLIDAYS ABROAD, ETC.**

Employment		...	...	293
Entertainment		...	...	15
Holidays Abroad, etc.		...	...	82
				390



## SUMMARY OF THE WORK CARRIED OUT BY THE SCHOOL HEALTH VISITORS DURING THE YEAR 1961.

### Health Surveys and Infestation with Vermin

Health Surveys ... ..	110
No. of Clinic Sessions re Cleansing ... ..	42
No. of Examinations ... ..	25,861
No. of individual children found unclean ... ..	421

### Home Visits

Cleanliness ... ..	167
Medical Treatment ... ..	350
Hospital References ... ..	18
Miscellaneous ... ..	148
B.C.G. ... ..	—
Ineffective visits, i.e. No Access ... ..	42

### Other

Visits to Nursery Class ... ..	10
Visits to Special Schools ... ..	10
Sessions for Medical Inspections ... ..	268
Sessions at Minor Ailment Clinics ... ..	549
Sessions at Ophthalmic Clinics ... ..	97
Sessions at Vision Testing of 8 year old pupils...	36
Sessions on Weighing and Measuring (Medical Inspection)	38
Sessions spent on Surveys ... ..	239
TOTAL VISITS ...	973
TOTAL SESSIONS ...	1,360.

### ELLERAY PARK OPEN-AIR SCHOOL

During the year 16 children were admitted, the classification of their defects or diseases being as follows:—

Spastic Paralysis ... ..	3
Asthma ... ..	1
Asthma and Bronchitis ... ..	1
Bronchitis ... ..	1
General Debility ... ..	1
Congenital Heart Disease ... ..	1
Perthe's Disease ... ..	1
Spinal Injury ... ..	2
Coeliac Disease ... ..	1
Petit Mal ... ..	1
Bowing of Tibia ... ..	1
Congenital Defect of Vertebrae ... ..	1
General Muscular Inco-ordination ... ..	1

During the year nine pupils were transferred to ordinary schools, eight left to employment, two left the district, and three left for other reasons.

## **SCHOOL DENTAL SERVICE.**

### **Observations of Mr. C. J. Luya, Principal School Dental Officer**

The year 1961 was notable for the fact that, for the first time since 1954, the staff was up to its establishment of four full time dental officers and four full time dental surgery assistants, which made it possible to increase the time spent on dental inspection in the schools. Dental inspection goes hand in hand with treatment; there would be no difficulty in inspecting the teeth of every child in Wallasey once a year were it not for the fact that children found needing treatment have to be seen at the clinics before a fresh inspection can be started, and dental treatment, particularly when the state of the teeth is poor, takes time. However, a large number of the children in Wallasey are inspected regularly by private dentists. At each clinic a special file is kept containing the names of children whose parents have accepted our offer that they should be inspected at the clinic every year, or at a shorter interval if necessary, and this ensures that regular inspection is available to parents who are really concerned about their children's teeth. On the whole, Wallasey is well off for dentists in a country which has too few, and any parents should find it reasonably easy to get regular inspection either from the School Dental Service or from the private dentists who are willing to treat children under the National Health Service.

Dental Clinics and dentists generally spend most of the time treating the results of dental decay, but during the year 1961 attempts were made by the Health and Education Committees to do something about the causes of decay, which is a disease of civilisation and one not easily dealt with in our complex and complicated modern life. Briefly and very simply, civilised man is using teeth, designed to deal with simple rough food, to eat a complicated diet of soft sugary meals which do not need to be chewed, and it is a simple rule of nature that any portion of the body which becomes functionless is likely to give trouble of one kind or another. It is quite impossible for the human race to go back to the diet which is good for its teeth and, incidentally, for its body, and the only thing which can be done is to try and persuade people generally to follow certain simple rules which will help to offset the results of changed habits.

During the year 1961 the County Borough of Wallasey tackled four problems in their campaign against dental decay — (1) Ice Lollies, (2) The Fluoridation of Water, (3) The Sale of Decay-causing Snacks in School Tuckshops, (4) Propaganda.

#### **(1) Ice Lollies**

Ice Lollies are frozen fruit juices on sticks, very cheap, very



palatable and much beloved by children. Unfortunately, investigations have shown that certain of these 'water ices' are acid enough to be a danger to teeth. The trouble is that they are designed to be gnawed by the front teeth and are, therefore, in contact with them for a comparatively long time (as opposed to fruit drinks which are swallowed quickly), and this factor combined with the extreme cold and their acidity makes them a definite danger to the teeth.

## **(2) The Fluoridation of Water**

This is an attempt to prevent dental decay at source. Briefly, it has been shown that where the element fluorine is present in drinking water, either naturally (as it is in parts of North England) or artificially to the extent of one part per million, the amount of decay in children's teeth is reduced by 50%; the teeth of adults does not seem to be affected. Fluoridation is extensively practised in America and pilot schemes are in operation in the British Isles in certain areas. The Health Committee considered advising that the water of Wallasey should be fluoridated, but eventually decided to wait until the Government publish their report on the fluoridation schemes already in progress in the United Kingdom.

## **(3) Snacks in Schools**

A tuck shop is as much a part of the natural scenery of a school as the blackboard and chalk—a place where children can spend pocket money during morning and afternoon breaks and, naturally enough, they buy things they can eat. Unhappily, for civilised man (and here the word embraces children) 'between-meal' snacks are bad for teeth: man's primitive cousin can eat where and when he pleases, for his meat is chewed off the bone, his fruit comes fresh off the bush and his roots straight out of the ground.

The popular snacks are biscuits of one sort or another, which unluckily are particularly bad for the teeth, but one of the great difficulties of this problem is that, although it is possible to draw up a long and impressive list of what should not be eaten as snacks between meals, the non-harmful snacks can be counted on the fingers of one hand and not all are palatable, and some are expensive, seasonal or in short supply. Apples, for example, are excellent, but bulky, seasonal and often expensive and difficult to get, and this applies to most fruits. Carrots are excellent but an acquired taste; nuts and raisins are good when obtainable, and there are certain crisp breads. However, the Education Committee issued a directive and the Heads of schools co-operated nobly; their efforts are to be the more commended as often any profits from the sale of popular (but tooth decaying) snacks were used to provide amenities for the children.

A simple method of mouth and tooth cleaning, which needed neither tooth brush nor toothpaste but only a cup full of water, was brought to the notice of the teachers as a possible help after school meals.



#### (4) Propaganda

Dentists in private practice are also concerned about the state of children's teeth, and the Local Dental Committee passed a resolution on the subject which was sent to the Executive Committee of the National Health Service, and thence to the Local Authority. As a result, a round table conference was held on which were represented the Education Committee, the Health Committee, the Local Dental Committee, the National Health Service Executive Committee and others interested. This body met several times and organised a publicity campaign. Slogans were devised, leaflets and literature were obtained from various sources and their exhibition and distribution arranged. Also, a series of lectures by the Principal Dental Officer were authorised, help was given by various local organisations and the help of the press was enlisted.

There was in this campaign, as in many others of the same sort, one snag. The sweets we suck, the biscuits and snacks we eat, and the chocolates we indulge in are very pleasant, and few do realise they are not very good for us or our teeth. We nevertheless enjoy ourselves, and millions of pounds are spent by advertisers urging us to go on enjoying ourselves. Day in, day out, on the hoardings, in the magazines, at the cinema, on the television, eat this, chew that, crunch the other.

The amount of money available to any organisation which wishes to counter this sort of campaign, and persuade us not to do things we like doing and, to do things we do not like doing, is ludicrously tiny compared to the millions spent by the other side, and until something is done on this point, no anti-campaign is going to get very far.

On the whole, these activities were unusual and rewarding. In one way or another, they will be carried on during 1962 and 1963.

### PHYSICAL EDUCATION.

#### **Observations submitted by Mr. Clare, Organiser of Physical Training:**

Once again it must be said that Physical Education in schools is based on the needs of children possessing normal health and physique. Few teachers, even those trained as specialists in Physical Education, have had training in remedial gymnastics and the part played in the schools must be limited to detection of faults and general corrective work.

Modern teaching in Physical Education aims to develop awareness and mastery of bodily movement in a far wider variety of situations than was envisaged in the era of formal gymnastics, so that thought and inventiveness by the children are considered of more importance than mechanical response to commands in a limited repertoire of artificial exercises. By enlisting co-operation in this way and by providing, more particularly in the Secondary School, the greatest possible range of physical activities it is hoped to retain the children's natural love of movement and to develop recreative interests which will remain throughout life.

The range of recreative physical activities being developed and included in the Physical Education programme now extends far beyond the traditional team games, and increasing emphasis is now being placed on those of a more individual nature. Progress in Swimming and Life Saving, Athletics and Cross Country Running are most marked and readily apparent but whilst every school through limitations of staff and facilities may not be able to cater for the full range, such activities as Lawn Tennis, Badminton, Canoeing, Dinghy Sailing, Basketball, Netball, Lightweight Camping and Mountain Activities are now available to children in Wallasey Secondary Schools. It will be obvious that the Physical Education staff alone could not hope to cope with all these activities, many of which must needs be practised out of school time, and due tribute should be paid to the many teachers in both Primary and Secondary schools who give unstintingly of their energy and leisure time to the recreational interests of their pupils.

In the provision of facilities in Wallasey steady progress is being made. Playing fields have been taken into use at Lingham Primary and Clare Mount Schools, both with all-weather cricket wickets, and the field at Fender Lane which will serve Moreton schools has been laid. New gymnasia at Gorsedale and St. George's Secondary Schools are nearing completion, and work will shortly be commenced on modernising the gymnasium at the Wallasey Technical College.

## **SCHOOL MEALS SERVICE, 1961.**

### **Remarks of Miss Collins, School Meals Organiser:**

The meals census taken on a day in October, 1961, showed that 6,750 children had school meals on that day, a slight increase on the previous year. 775 of these meals were provided free of charge to necessitous children.

During the school holidays meals supplied from a central kitchen were served at 8 centres in the Borough. A centre was opened at Birket Primary School for the greater convenience of a number of children who had previously travelled to Moreton.

During the Autumn term the kitchen at Gorsedale Infant School was put into operation. At present 50 meals are cooked and served. The dining room is attractively furnished with octagonal tables, which have a laminated plastic surface.

Family Service which previously had functioned only in Secondary Schools, has been introduced with success into a Primary and an Infant School.

Improvements in equipment are continuously being made at kitchens, and in particular replacements of boiling pans, hot cupboards and sinks are, wherever possible, of stainless steel.

The benches and folding tables in dining rooms are gradually being replaced by chairs and tables with laminated plastic surfaces, a great improvement from the hygienic aspect, and giving also a more colourful appearance to the dining room.



# MEDICAL INSPECTION, 1961

## MAINTAINED PRIMARY AND SECONDARY SCHOOLS

### PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

**TABLE A.—PERIODIC MEDICAL INSPECTIONS**

Number of pupils on registers . . . . . 16,368

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1957 and later	25	25	100.00	—	—
1956	97	96	99.9	1	1.00
1955	822	819	99.64	3	.36
1954	62	60	96.8	2	3.20
1953	17	16	94.1	1	5.90
1952	22	22	100.00	—	—
1951	19	17	89.5	2	10.5
1950	434	433	99.77	1	.23
1949	766	765	99.87	1	.13
1948	329	328	99.7	1	.3
1947	489	487	99.6	2	.4
1946 and earlier	1,164	1,158	99.5	6	.5
<b>TOTAL</b>	<b>4,246</b>	<b>4,226</b>	<b>99.53</b>	<b>20</b>	<b>.47</b>

**TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT  
PERIODIC MEDICAL INSPECTIONS**  
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1957 and later	—	16	13
1956	3	71	49
1955	57	345	280
1954	8	26	23
1953	1	8	7
1952	1	18	16
1951	—	15	12
1950	79	137	167
1949	128	208	259
1948	46	87	102
1947	95	122	173
1946 and earlier	246	321	444
<b>TOTAL</b>	<b>664</b>	<b>1,374</b>	<b>1,545</b>



**TABLE C.—OTHER INSPECTIONS**

Number of Special Inspections ... ..	1,268
Number of Re-inspections ... ..	230
Total ... ..	1,498

**TABLE D.—INFESTATION WITH VERMIN**

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	25,861
(b) Total number of individual pupils found to be infested	421
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ... ..	—
(d) Number of individual pupils in respect of whom cleansing orders were issued, (Section 54(3), Education Act, 1944) ... ..	—

**PART II—DEFECTS FOUND BY MEDICAL INSPECTION  
DURING THE YEAR**

**PART II TABLE A.—PERIODIC INSPECTIONS**

Defect or Disease  (2)						PERIODIC INSPECTIONS							
						Entrants		Leavers		Others		Total	
						(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
Skin ... ..						32	6	106	49	64	16	202	71
Eyes—(a) Vision ... ..						68	94	342	20	254	49	664	163
(b) Squint ... ..						49	11	20	4	26	4	95	19
(c) Other ... ..						8	2	9	8	16	11	33	21
Ears—(a) Hearing ... ..						13	35	8	10	15	17	36	62
(b) Otitis Media ... ..						11	17	10	1	9	7	30	25
(c) Other ... ..						12	4	41	4	30	4	83	12
Nose and Throat ... ..						79	63	33	60	45	98	157	221
Speech ... ..						41	6	5	5	14	6	60	17
Lymphatic Glands ... ..						5	22	2	10	2	22	9	54
Heart ... ..						7	13	10	30	6	21	23	64
Lungs ... ..						32	13	14	15	34	33	80	61
Developmental—													
(a) Hernia ... ..						7	6	2	—	5	2	14	8
(b) Other... ..						14	45	20	35	26	65	60	145
Orthopaedic—													
(a) Posture ... ..						2	6	16	19	14	16	32	41
(b) Feet ... ..						38	17	57	20	43	29	138	66
(c) Other... ..						16	8	51	43	39	39	106	90
Nervous System—													
(a) Epilepsy ... ..						1	1	2	2	7	1	10	4
(b) Other... ..						4	2	18	13	19	5	41	20
Psychological—													
(a) Development ... ..						66	4	5	7	27	19	98	30
(b) Stability ... ..						16	18	10	13	27	21	53	52
Abdomen ... ..						6	2	1	1	3	2	10	5
Other ... ..						1	3	2	1	1	—	4	4

**PART II TABLE B.—SPECIAL INSPECTIONS**

Defect or Disease (2)	SPECIAL INSPECTIONS	
	Pupils requiring Treatment (3)	Pupils requiring Observation (4)
Skin ... ..	71 + (323)★	7
Eyes—(a) Vision ... ..	34	1
(b) Squint ... ..	5	—
(c) Other ... ..	56	9
Ears—(a) Hearing ... ..	14	4
(b) Otitis Media ... ..	5	1
(c) Other ... ..	71	8
Nose and Throat ... ..	29	9
Speech ... ..	13	1
Lymphatic Glands ... ..	—	—
Heart ... ..	1	—
Lungs ... ..	11	1
Developmental —		
(a) Hernia ... ..	3	—
(b) Other ... ..	6	1
Orthopaedic—		
(a) Posture ... ..	6	1
(b) Feet ... ..	61	2
(c) Other ... ..	36	5
Nervous System—		
(a) Epilepsy ... ..	2	—
(b) Other ... ..	11	4
Psychological—		
(a) Development ... ..	11	1
(b) Stability ... ..	9	1
Abdomen ... ..	3	1
Other ... ..	380	13

★ No. of pupils found, to require treatment for Warts or Veruccae.

**TREATMENT OF PUPILS ATTENDING MAINTAINED  
AND ASSISTED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**PART III TABLE A.—EYE DISEASES, AND DEFECTIVE VISION  
AND SQUINT**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	212
Errors of refraction (including squint) ... ..	1,232
Total ... ..	1,444
Number of pupils for whom spectacles were prescribed ... ..	822

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear ... ..	2
(b) for adenoids and chronic tonsillitis ... ..	260
(c) for other nose and throat conditions ... ..	9
Received other forms of treatment ... ..	109
Total ... ..	380
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1961 ... ..	2
(b) in previous years ... ..	9

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient depart- ments ... ..	1,423
(b) Pupils treated at school for postural defects ...	20
Total ... ..	1,443

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanness, for which see Table D of Part 1)

	Number of cases known to have been treated
Ringworm—(a) Scalp ... ..	—
(b) Body ... ..	—
Scabies ... ..	—
Impetigo ... ..	59
Other skin diseases ... ..	147
Total ... ..	206

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated, at Child Guidance Clinics ... ..	102



TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Received regular treatment ... ..	103
Received treatment at irregular intervals ... ..	135
Total pupils treated by Speech Therapist ... ..	238

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ... ..	1,396
... (b) Pupils who received convalescent treatment under School Health Service arrangements	6
(c) Pupils who received B.C.G. vaccination ...	1,029
(d) Other than (a), (b) and (c) above:—	
Treatment given for warts ... ..	151
„ „ „ verrucae ... ..	97
Hospital In-patient treatment—Medical ... ..	156
„ „ „ —Surgical ... ..	112
„ „ „ —Orthopaedic ... ..	53
Total (a)—(d)	3,000

#### PART IV.—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental  
Officers:—

(a) At Periodic Inspections ... ..	8,591
(b) As Specials ... ..	1,687

Total (1) ... .. 10,278

(2) Number found to require treatment ... .. 6,350

(3) Number offered treatment ... .. 5,587

(4) Number actually treated ... .. 4,366

(5) Number of attendances made by pupils for treatment,  
including those recorded at 11(h) ... .. 9,002

(6) Half days devoted to—

(a) Periodic (School) Inspection ... .. 86

(b) Treatment ... .. 1,718

Total (6) ... .. 1,804

(7) Fillings: (a) Permanent Teeth ... .. 3,829

(b) Temporary Teeth ... .. 77

Total (7) ... .. 3,906

(8) Number of Teeth Filled :		(a) Permanent Teeth ... ..	3,432
		(b) Temporary Teeth ... ..	74
		Total (8) ... ..	3,506
(9) Extractions :		(a) Permanent Teeth ... ..	1,196
		(b) Temporary Teeth ... ..	2,039
		Total (9) ... ..	3,235
(10) Administration of general anaesthetics for extraction			2,015
(11) Orthodontics :			
		(a) Cases commenced during the year ... ..	10
		(b) Cases carried forward from previous year ... ..	—
		(c) Cases completed during the year ... ..	2
		(d) Cases discontinued during the year ... ..	1
		(e) Pupils treated with appliances ... ..	10
		(f) Removable appliances fitted ... ..	5
		(g) Fixed appliances fitted ... ..	4
		(h) Total attendances ... ..	45
(12) Number of pupils supplied with artificial teeth ... ..			27
(13) Other operations :		(a) Permanent Teeth ... ..	1,978
		(b) Temporary Teeth ... ..	4
		Total (13) ... ..	1,982

### MINOR AILMENTS AND OTHER CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey ... ..	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ...	Minor Ailments and S.M.O.'s Clinic
	(p.m.)	—	—
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey ... ..	Ophthalmic Clinic (Mr. E. Edwards)
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments and S.M.O.'s Clinic
		Child Welfare Centre, Water Street, Wallasey ...	—
	(p.m.)	School Clinic, Merton Road, Wallasey ... ..	—
		Other Clinics ... ..	—

Wednesday	(a.m.)	School Clinic, Merton Road, Wallasey ... ..	S.M.O.'s Clinic Minor Ailments
		Child Welfare Centre, Moreton ... ..	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ...	Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey ... ..	Immunisation (1st and 3rd Wednesday of each month)
		Child Welfare Centre, Moreton ... ..	—
		Child Welfare Centre, Water Street, Wallasey ...	—
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey ... ..	Minor Ailments
		Child Welfare Centre, Moreton ... ..	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ...	—
	(p.m.)	School Clinic, Merton Road, Wallasey ... ..	Orthopaedic Specialist's Clinic (Mr. Davies), (Except every 4th Thursday)
		Child Welfare Centre, Moreton ... ..	d.o. (every 4th Thursday)
		Child Welfare Centre, Water Street, Wallasey ...	—
Friday	(a.m.)	School Clinic, Merton Road, Wallasey ... ..	Ophthalmic Clinic (Mr. E. Edwards) (Fortnightly)
		Child Welfare Centre, Moreton ... ..	Ophthalmic Clinic (Mr. E. Edwards) (Fortnightly)
		Child Welfare Centre, Water Street, Wallasey ...	Minor Ailments Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey ... ..	S.M.O.'s Clinic (Fortnightly)
		Child Welfare Centre, Moreton ... ..	Immunisation (Fortnightly)
		Child Welfare Centre, Water Street, Wallasey ...	—
Saturday	(a.m.)	—	—



## SPEECH THERAPY CLINICS

Monday	(a.m.)	Vaughan Road J. M. School, Wallasey.
	(p.m.)	Clare Mount School, Wallasey.
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey.
	(p.m.)	School Clinic, Merton Road, Wallasey.
Wednesday	(a.m.)	Child Welfare Centre, Water Street, Wallasey.
	(p.m.)	Elleray Park School, Wallasey.
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey.
	(p.m.)	School or Home visits.
Friday	(a.m.)	Child Welfare Centre, Water Street, Wallasey.
	(p.m.)	Welfare Centre, Oakenholt Road, Moreton.

## PHYSIOTHERAPY CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and R.E. and Individual Treatments) Welfare Centre, Oakenholt Road, Moreton (Remedial Exercises)
	(p.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments) Welfare Centre, Oakenholt Road, Moreton (Remedial Exercises)
Tuesday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) Congregational Church Hall, Princess Road, Wallasey (Individual and Group Treatments)
	(p.m.)	School Clinic, Merton Rd., Wallasey. (Remedial Exercises) Welfare Centre, Oakenholt Road, Moreton (U.V.L. and Remedial Exercises)
Wednesday	(a.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and Individual Treatments) Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments)
	(p.m.)	Child Welfare Centre, Water Street, Wallasey. (Remedial Exercises) School Clinic, Merton Rd., Wallasey. (Individual Treatments)

Thursday	(a.m.)	Elleray Park Special School, Wallasey (Remedial Exercises) Welfare Centre, Oakenholt Road, Moreton (U.V.L. and Individual Treatments)
	(p.m.)	School Clinic, Merton Road, Wallasey (Orthopaedic Specialist's Clinic) Welfare Centre, Oakenholt Road, Moreton (Orthopaedic Specialist's Clinic once per month)
Friday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) School Clinic, Merton Road, Wallasey (U.V.L. and Individual Treatments)
	(p.m.)	Grosvenor Assembly Rooms, Grosvenor Street, Wallasey (Remedial Exercises) School Clinic, Merton Rd., Wallasey. (Individual Treatments)

**SCHOOL DENTAL CLINICS**

Monday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. Child Welfare Centre, Oakenholt Rd., Moreton. School Clinic, Merton Road, Wallasey.
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Moreton.
Tuesday	(a.m.)	Child Welfare Centre, Moreton. School Clinic, Merton Road, Wallasey. Child Welfare Clinic, Water Street, Wallasey.
	(p.m.)	Child Welfare Centre, Moreton. School Clinic, Merton Road, Wallasey. Child Welfare Clinic, Wallasey.
Wednesday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Rd., Moreton. Child Welfare Clinic, Wallasey.
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Rd., Moreton. Child Welfare Clinic, Wallasey.
Thursday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. Child Welfare Centre, Oakenholt Rd., Moreton. Child Welfare Clinic, Wallasey.
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Rd., Moreton. Child Welfare Clinic, Wallasey.
Friday	(a.m.)	School Clinic, Merton Road, Wallasey. Child Welfare Clinic, Water Street, Wallasey. School Dental Clinic, 47 Liscard Village, Wallasey.
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Clinic, Water Street, Wallasey.
Saturday	(a.m.)	Child Welfare Clinic, Wallasey.

**CHILD GUIDANCE CLINIC***(Psychiatric Department)*

120, Church Street, Wallasey, Dr. G. Egan, M.D., Ch.B., D.P.M.,  
Tuesday afternoons and Thursday afternoons.



# HANDICAPPED PUPILS—YEAR 1961

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	Blind	Partially Sighted	Deaf	Partially Deaf	Physically Handicapped	Delicate	Maladjusted	E.S.N.	Epileptic	Speech Defects	Total
Year Ended 31st December, 1961											
(1) Newly assessed as needing special Educational Treatment at Special Schools or Boarding Homes... ..	1	—	—	—	8	8	2	23	2	—	44
(2) Newly placed in Special Schools or Boarding Homes ... ..	1	—	—	—	8	8	1	19	1	—	38
(3) As at 31st January, 1962 Pupils on Registers of Maintained Special Schools :— (a) Day Pupils ... .. (b) Boarding Pupils ... ..	— —	1 —	2 1	5 1	52 —	39 —	— —	119 3	3 —	1 —	222 5
(4) Pupils on Registers of Non-Maintained Special Schools :— (a) Day Pupils ... .. (b) Boarding Pupils ... ..	— 1	— 3	— —	— —	2 2	— —	— 6	— 2	— —	— —	2 14
(5) On the Registers of Independent Schools under arrangements made by the Authority ... ..	—	—	—	—	—	—	2	1	—	—	3
Total (3-5) ... ..	1	4	3	6	56	39	8	125	3	1	246
(6) Pupils requiring places in Special Schools :— (a) Day ... .. (b) Boarding ... ..	— —	— —	— —	— —	1 1	— —	— 1	2 1	— 1	— —	3 4
(7) Pupils being educated under the provisions of Sec. 56 of the Education Act, 1944 :— (a) In Hospitals ... .. (b) At Home... ..	— —	— —	— —	— —	— 3	— 1	— —	— —	— 1	— —	— 5

## CHILDREN FOUND UNSUITABLE FOR SCHOOL—YEAR ENDED 31st DECEMBER, 1961

Under Sec. 57(4) of the Education Act, 1944 ... .. 4  
Number of decisions cancelled under Sec. 57A(2) of the Education Act, 1944 ... .. 1

